Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NORTH CAROLINA (NC EXEMPTIONS)	-	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Natasha First name Ann Middle name Richardson Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	Natasha Ann Scarboro	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7718	

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Debtor 1 Natasha Ann Richardson

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs. Business name(s) EIN	☐ I have not used any business name or EINs. Business name(s) EIN		
5.	Where you live	102 Revell Road	If Debtor 2 lives at a different address:		
		Selma, NC 27576 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Johnston			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Case number (if known)

Par	Tell the Court About	Your Ban	kruptcy Ca	se						
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.								
	choosing to file under	☐ Chapter 7								
		☐ Cha	pter 11							
		☐ Cha	pter 12							
		■ Cha	pter 13							
			•							
8.	How you will pay the fee	al	bout how yo	u may pay. Typically, if you attorney is submitting your p	are paying	the fee yourself,	you may pay with cash	r local court for more details h, cashier's check, or money h a credit card or check with		
				the fee in installments. If e in Installments (Official Fo		e this option, sign	and attach the Applic	ation for Individuals to Pay		
		b a _l	ut is not requ pplies to you	uired to, waive your fee, and	l may do so able to pay	only if your incom the fee in install	me is less than 150% ments). If you choose	pter 7. By law, a judge may, of the official poverty line that this option, you must fill out a your petition.		
	Have you filed for									
9.	Have you filed for bankruptcy within the last 8 years?	□ No. ■ Yes.								
			District	Eastern District of North Carolina, Raleigh Division	When	1/12/21	Case number	21-00058-5		
			District	Eastern District of North Carolina, Raleigh Division	When	6/05/19	Case number	19-02584-5		
			District		When		Case number			
10.	Are any bankruptcy cases pending or being	■ No								
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.								
			Debtor				Relationship to	you		
			District		When		Case number, if	known		
			Debtor				Relationship to	you		
			District		When		Case number, if	known		
11.	Do you rent your	□ No.	Go to li	ne 12.						
	residence?	Yes.	Has yo	ur landlord obtained an evic	tion judgm	ent against you?				
			•	No. Go to line 12.						
			_	Yes. Fill out <i>Initial Statemen</i> bankruptcy petition.	nt About ar	Eviction Judgme	ent Against You (Form	101A) and file it with this		

Debtor 1 Natasha Ann Richardson

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Den	Natasna Ann Rich	narason			Case number (if known)			
_			v •					
Par	Report About Any Bu	ısinesses	You Owi	as a Sole Propriet	or			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	e and location of busi	iness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any					
	If you have more than one sole proprietorship, use a		Numl	ber, Street, City, State	e & ZIP Code			
	separate sheet and attach it to this petition.		Chec	k the appropriate box	x to describe your business:			
					ess (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				-	efined in 11 U.S.C. § 101(53A))			
					r (as defined in 11 U.S.C. § 101(6))			
				None of the above				
Par	· · ·	proceed you are of cash-flow § 1116(1) No. No. Yes.	under Suchoosing vistatemen (B). I am Code I am I do r I am	to proceed under Subtent, and federal incomment, and federal incomment filing under Chapter 1 to the choose to proceed filing under Chapter 1 to the choose to proceed see to proceed under State 1 to the choose 1 to the choo	court must know whether you are a small business debtor or a debtor choosing to can set appropriate deadlines. If you indicate that you are a small business debtor or bechapter V, you must attach your most recent balance sheet, statement of operations, ne tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. ter 11. 11, but I am NOT a small business debtor according to the definition in the Bankruptcy 11, I am a small business debtor according to the definition in the Bankruptcy Code, and d under Subchapter V of Chapter 11. 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I Subchapter V of Chapter 11. 12, Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is	the hazard?				
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			diate attention is , why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?				
					Number, Street, City, State & Zip Code			

Debtor 1 Natasha Ann Richardson

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Natasha Ann Rich	ardson		Case number (if known)					
Part	6: Answer These Quest	ions for Rep	orting Purposes						
16.	What kind of debts do you have?			onsumer debts? Consumer debts are descended, family, or household purpose."	efined in 11 U.S.C. § 101(8) as "incurred by an				
			No. Go to line 16b.						
			■ Yes. Go to line 17.						
			Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
			No. Go to line 16c.	ÿ .					
			Yes. Go to line 17.						
		16c. S	tate the type of debts you	owe that are not consumer debts or busin	ess debts				
17.	Are you filing under Chapter 7?	■ No.	am not filing under Chapte	r 7. Go to line 18.					
	Do you estimate that after any exempt			Do you estimate that after any exempt provailable to distribute to unsecured creditor	operty is excluded and administrative expenses rs?				
	property is excluded and administrative expenses] No						
	are paid that funds will be available for] Yes						
	distribution to unsecured creditors?								
18.	How many Creditors do	_		П 4 000 5 000	Погодите одо				
10.	you estimate that you	■ 1-49 □ 50-99		□ 1,000-5,000 □ 5001-10,000	□ 25,001-50,000 □ 50,001-100,000				
	owe?	☐ 100-199		☐ 10,001-25,000	☐ More than100,000				
		□ 200-999							
19.	How much do you	\$ 0 - \$50,000		☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion				
	estimate your assets to be worth?	□ \$50,001		☐ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion				
			1 - \$500,000	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion				
		□ \$500,00	1 - \$1 million	□ \$100,000,001 - \$500 million	☐ Iviore trian \$50 billion				
20.	How much do you	□ \$0 - \$50	,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion				
	estimate your liabilities to be?		- \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion				
			1 - \$500,000	□ \$50,000,001 - \$100 million □ \$100.000.001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion				
		₩ \$500,00	1 - \$1 million		inore trait \$30 billion				
Part	7: Sign Below								
For	you	I have exam	nined this petition, and I de	clare under penalty of perjury that the info	ormation provided is true and correct.				
				7, I am aware that I may proceed, if eligible relief available under each chapter, and I	le, under Chapter 7, 11,12, or 13 of title 11, choose to proceed under Chapter 7.				
				not pay or agree to pay someone who is ne notice required by 11 U.S.C. § 342(b).	not an attorney to help me fill out this				
		I request re	lief in accordance with the	chapter of title 11, United States Code, sp	pecified in this petition.				
			nderstand making a false statement, concealing property, or obtaining money or property by fraud in connection nkruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, d 3571.						
		/s/ Natash	a Ann Richardson						
		Natasha A Signature o	Ann Richardson f Debtor 1	Signature of Deb	otor 2				
		Executed o	November 8, 2021	Executed on					
			MM / DD / YYYY	N	IM / DD / YYYY				

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Debtor 1 Natasha Ann Richardson Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Jason Watson for LOJTO Signature of Attorney for Debtor	Date	November 8, 2021						
Jason Watson for LOJTO 32986								
Printed name								
The Law Offices of John T. Orcutt, PC Firm name								
6616-203 Six Forks Road Raleigh, NC 27615								
Number, Street, City, State & ZIP Code								
Contact phone (919) 847-9750	Email address	postlegal@johnorcutt.com						
32986 NC								
Bar number & State								

Fill in this info	ormation to identify your	case:		
Debtor 1	Natasha Ann Ric			
Debior 1	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
(Spouse II, IIIIIIg)	First Name			
United States	Bankruptcy Court for the:	EASTERN DISTRICT OF NO EXEMPTIONS)	RTH CAROLINA (NC	
Case number (if known)				☐ Check if this is an amended filing
Be as complet information. It	nt of Financial A	ole. If two married people are fattach a separate sheet to this	als Filing for Bankrupt iling together, both are equally respondent. form. On the top of any additional p	onsible for supplying correct
	e Details About Your Mai	rital Status and Where You Liv	ed Before	
☐ Marri				
2. During the	e last 3 years have you l	ived anywhere other than whe	re you live now?	
	List all of the places you liv	ved in the last 3 years. Do not in	clude where you live now. Debtor 2 Prior Address:	Dates Debtor 2
Debtor 1	Titol Address.	lived there	Debitor 2 i flor Address.	lived there
	nemi Springs Drive olis, NC 28081	From-To: 2018 - 2019	☐ Same as Debtor 1	☐ Same as Debtor 1 From-To:
	oadstairs d, NC 28025	From-To: 2014 - 2018	☐ Same as Debtor 1	☐ Same as Debtor 1 From-To:
No Yes. Part 2 Exp 4. Did you h Fill in the t If you are	Make sure you fill out Scholain the Sources of Your ave any income from emotal amount of income you	edule H: Your Codebtors (Official Income ployment or from operating a preceived from all jobs and all but the form of the control of the con	a, New Mexico, Puerto Rico, Texas, Wa	previous calendar years?
		Debtor 1	Debtor 2	

Official Form 107

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Debtor 1 Natasha Ann Richardson					on	Case	Case number (if known)				
					Debtor 1		Debtor 2				
					Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)		
			1 of currer iled for ban	nt year until ıkruptcy:	■ Wages, commissions, bonuses, tips	\$43,682.70	☐ Wages, combonuses, tips	missions,			
					☐ Operating a business		☐ Operating a	business			
			dar year: December :	31, 2020)	■ Wages, commissions, bonuses, tips	\$42,990.00	☐ Wages, com bonuses, tips	missions,			
					☐ Operating a business		☐ Operating a	business			
			lar year bei December		■ Wages, commissions, bonuses, tips	\$41,391.00	☐ Wages, com bonuses, tips	missions,			
					☐ Operating a business		☐ Operating a	business			
	=	No	Fill in the de		Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and	Debtor 2 Sources of inc Describe below	ome	Gross income (before deductions and exclusions)		
						exclusions)			and exclusione,		
Part	3:	List	Certain Pa	yments You	Made Before You Filed for E	Bankruptcy					
	_	either No.	Neither De	ebtor 1 nor D	's debts primarily consumer lebtor 2 has primarily consu personal, family, or househol	mer debts. Consumer debts	s are defined in 11	U.S.C. § 10 ⁴	1(8) as "incurred by an		
			During the No.	90 days befo	re you filed for bankruptcy, did	d you pay any creditor a tota	I of \$6,825* or mo	re?			
			☐ Yes * Subject :	paid that cre not include	each creditor to whom you paid editor. Do not include paymen payments to an attorney for the ton 4/01/22 and every 3 years	ts for domestic support oblig iis bankruptcy case.	ations, such as ch	ild support a	nd alimony. Also, do		
	.	Yes.			r both have primarily consure you filed for bankruptcy, did		I of \$600 or more?				
			□ No.	Go to line 7							
			■ Yes	include pay	each creditor to whom you paid ments for domestic support ob this bankruptcy case.						
	Cred	ditor'	s Name and	d Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this p	payment for		
						-					

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Case number (if known)

(Creditor's Name and Address	Dates of payment	Total amount	Amount you	Was this pa	ayment for
			paid	still owe	_	
	Paid ordinary payments, in part, on bills and loans.		\$0.00	\$0.00	☐ Mortgag	е
•	on bills and loans.				☐ Car ☐ Credit Ca	
					Loan Re	payment s or vendors
_					Other	s or venuors
Ir o a	Vithin 1 year before you filed for bankruptous iders include your relatives; any general page which you are an officer, director, person in business you operate as a sole proprietor. 1 imony.	rtners; relatives of any ger control, or owner of 20% of	neral partners; partners partners or more of their voting	erships of which y g securities; and a	ou are a generany managing a	al partner; corporatio agent, including one f
	No					
L						
ı	nsider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
Ir	sider? clude payments on debts guaranteed or cos No	igned by an insider.				
	Yes. List all payments to an insider					
I	nsider's Name and Address	Dates of payment	T-1-1 1			41.1
			Total amount paid	Amount you still owe	Reason for Include cred	
art 4	: Identify Legal Actions, Repossession	. ,		•		
V	/ithin 1 year before you filed for bankrupto st all such matters, including personal injury odifications, and contract disputes.	ns, and Foreclosures	paid ny lawsuit, court ac	still owe	Include cred	ditor's name
M L m	Vithin 1 year before you filed for bankruptor st all such matters, including personal injury codifications, and contract disputes. No Yes. Fill in the details.	ns, and Foreclosures cy, were you a party in ar cases, small claims action	paid ny lawsuit, court ac s, divorces, collectio	still owe	Include cred trative proceed actions, suppor	ditor's name ding? t or custody
m E	/ithin 1 year before you filed for bankrupto st all such matters, including personal injury odifications, and contract disputes.	ns, and Foreclosures	paid ny lawsuit, court ac	still owe	Include cred	ditor's name ding? t or custody
W L m	Vithin 1 year before you filed for bankruptor st all such matters, including personal injury codifications, and contract disputes. No Yes. Fill in the details. Case title	ns, and Foreclosures cy, were you a party in ar cases, small claims action Nature of the case cy, was any of your proper	paid ny lawsuit, court ac s, divorces, collectio Court or agency	still owe	Include cred trative proceed actions, suppor	ditor's name ding? It or custody
W L m	//ithin 1 year before you filed for bankrupto st all such matters, including personal injury odifications, and contract disputes. No Yes. Fill in the details. Case title Case number //ithin 1 year before you filed for bankrupto heck all that apply and fill in the details below	ns, and Foreclosures cy, were you a party in ar cases, small claims action Nature of the case cy, was any of your proper	paid ny lawsuit, court ac s, divorces, collectio Court or agency	still owe	Include cred trative proceed actions, suppor	ditor's name ding? It or custody
W C	//ithin 1 year before you filed for bankrupto st all such matters, including personal injury odifications, and contract disputes. No 1 Yes. Fill in the details. Case title Case number //ithin 1 year before you filed for bankrupto heck all that apply and fill in the details below	ns, and Foreclosures cy, were you a party in ar cases, small claims action Nature of the case cy, was any of your proper	paid ny lawsuit, court ac s, divorces, collectio Court or agency	still owe	Include cred trative proceed actions, suppor	ditor's name ding? It or custody
	/ithin 1 year before you filed for bankrupto st all such matters, including personal injury lodifications, and contract disputes. No Yes. Fill in the details. Case title Case number /ithin 1 year before you filed for bankrupto heck all that apply and fill in the details below No. Go to line 11.	Nature of the case cy, was any of your property	paid ny lawsuit, court ac s, divorces, collectio Court or agency erty repossessed, f	still owe	Include cred trative proceed actions, support Status of the	ding? It or custody The case It seized, or levied?
W C C	//ithin 1 year before you filed for bankrupto st all such matters, including personal injury podifications, and contract disputes. No 1 Yes. Fill in the details. Case title Case number //ithin 1 year before you filed for bankrupto heck all that apply and fill in the details below 1 No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address	Nature of the case cy, was any of your property Describe the Property Explain what happened	paid ny lawsuit, court ac s, divorces, collectio Court or agency erty repossessed, f	still owe	Include cred trative proceed actions, support Status of the	ding? It or custody The case It seized, or levied? Value of the proper
W C C C C	//ithin 1 year before you filed for bankrupto st all such matters, including personal injury podifications, and contract disputes. No 1 Yes. Fill in the details. Case title Case number //ithin 1 year before you filed for bankrupto heck all that apply and fill in the details below 1 No. Go to line 11. Yes. Fill in the information below.	Nature of the case cy, was any of your property	paid ny lawsuit, court ac s, divorces, collectio Court or agency erty repossessed, f	still owe tion, or adminision suits, paternity oreclosed, garni	Include cred trative proceed actions, support Status of the	ding? It or custody The case It seized, or levied? Value of the proper
W C C C C	//ithin 1 year before you filed for bankrupto st all such matters, including personal injury podifications, and contract disputes. No 1 Yes. Fill in the details. Case title Case number //ithin 1 year before you filed for bankrupto heck all that apply and fill in the details below 1 No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address Exeter Finance Corporation Attn:Officer Post Office Box 166097	Nature of the case cy, was any of your proper. Describe the Property Explain what happened 2015 Hyundai Elantr GEICO Auto Insuran	paid ny lawsuit, court ac s, divorces, collectio Court or agency erty repossessed, f	still owe tion, or adminision suits, paternity oreclosed, garni	Include cred trative proceed actions, support Status of the	ditor's name ding? It or custody de case d, seized, or levied? Value of the property
W C C C C	//ithin 1 year before you filed for bankrupto st all such matters, including personal injury podifications, and contract disputes. No 1 Yes. Fill in the details. Case title Case number //ithin 1 year before you filed for bankrupto heck all that apply and fill in the details below 1 No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address Exeter Finance Corporation Attn:Officer Post Office Box 166097	Nature of the case cy, was any of your proper. Describe the Property Explain what happened 2015 Hyundai Elantr GEICO Auto Insuran	paid ny lawsuit, court ac s, divorces, collectio Court or agency erty repossessed, f d a 150,000 miles ace: Policy # xxxx	still owe tion, or adminision suits, paternity oreclosed, garni	Include cred trative proceed actions, support Status of the	ding? It or custody The case It seized, or levied? Value of the proper
. W	//ithin 1 year before you filed for bankrupto st all such matters, including personal injury podifications, and contract disputes. No 1 Yes. Fill in the details. Case title Case number //ithin 1 year before you filed for bankrupto heck all that apply and fill in the details below 1 No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address Exeter Finance Corporation Attn:Officer Post Office Box 166097	Nature of the case cy, was any of your property Explain what happened 2015 Hyundai Elantr GEICO Auto Insuran xx18-32 Property was reposse	paid ny lawsuit, court ac s, divorces, collectio Court or agency erty repossessed, f d a 150,000 miles ace: Policy # xxxx	still owe tion, or adminision suits, paternity oreclosed, garni	Include cred trative proceed actions, support Status of the	ditor's name ding? t or custody
. w	//ithin 1 year before you filed for bankrupto st all such matters, including personal injury podifications, and contract disputes. No 1 Yes. Fill in the details. Case title Case number //ithin 1 year before you filed for bankrupto heck all that apply and fill in the details below 1 No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address Exeter Finance Corporation Attn:Officer Post Office Box 166097	Nature of the case cy, was any of your property Explain what happened 2015 Hyundai Elantr GEICO Auto Insuran xx18-32 Property was reposse	paid ny lawsuit, court ac s, divorces, collection Court or agency erty repossessed, f d a 150,000 miles ace: Policy # xxxx essed. aced. aced.	still owe tion, or adminision suits, paternity oreclosed, garni	Include cred trative proceed actions, support Status of the	ding? It or custody The case It seized, or levied? Value of the proper

Debtor 1 Natasha Ann Richardson

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Case number (if known)

	Creditor Name and Address	D	escribe the Property	Date	Value of the
		Е	xplain what happened		property
	Leonard Aluminum Utility Buildings	S	torage Unit	04/2021	\$1,000.00
	630 West Inependence Blvd.		Property was repossessed.		
	Suite 3		Property was foreclosed.		
	Mount Airy, NC 27030		Property was garnished.		
			Property was attached, seized or levied.		
11.	accounts or refuse to make a payment to No		, did any creditor, including a bank or financial in e you owed a debt?	stitution, set off any a	amounts from your
	Yes. Fill in the details.	_			
	Creditor Name and Address	D	escribe the action the creditor took	Date action was taken	Amount
2.	Within 1 year before you filed for bankru court-appointed receiver, a custodian, on the second secon		was any of your property in the possession of an her official?	assignee for the bene	efit of creditors, a
Par	15: List Certain Gifts and Contribution	ns			
13.	■ No □ Yes. Fill in the details for each gift. Gifts with a total value of more than \$6 per person Person to Whom You Gave the Gift and	00	did you give any gifts with a total value of more to the difference of the differenc	han \$600 per person Dates you gave the gifts	? Value
	Address:				
14.	Within 2 years before you filed for bank No Yes. Fill in the details for each gift or or a		did you give any gifts or contributions with a total	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo	total	Describe what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses				
15.	Within 1 year before you filed for bankru or gambling?	uptcy o	or since you filed for bankruptcy, did you lose any	thing because of the	t, fire, other disaster
	☐ No ■ Yes. Fill in the details.				
	Describe the property you lost and	Door	ribe any insurance coverage for the loss	Date of your	Value of property
	how the loss occurred	Includ	de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	Date of your loss	lost
	Co-Signed vehicle, 2006 Nissan Pathfinder. Vehicle totalled by co-signor, insurance resolved loss.	05/2021	\$2,940.00		

Debtor 1 Natasha Ann Richardson

Debt	or 1 Nat	asha Ann Richardson	C	Case number (if know	<i>m</i>)	
Part	7: List	Certain Payments or Transfers				
16.	Within 1 ye	ear before you filed for bankruptcy, about seeking bankruptcy or prepa	, did you or anyone else acting on your aring a bankruptcy petition? rers, or credit counseling agencies for ser			rty to anyone you
ļ	□ No ■ Yes. F	ill in the details.				
	Address Email or v	ho Was Paid vebsite address ho Made the Payment, if Not You	Description and value of any proper transferred		te payment transfer was ide	Amount of payment
		ad Street k, TX 76126-2009	Credit Counseling	10/	/2021	\$30.00
-	6616-203 Raleigh,	Offices of John T. Orcutt, PC Six Forks Road NC 27615 I@johnorcutt.com	Remaining Attorney Fees from previous case.	10/	/2021	\$599.00
-	6616-203 Raleigh,	Offices of John T. Orcutt, PC Six Forks Road NC 27615 I@johnorcutt.com	Attorney Fees paid in previous 21-00058-5	case, 202	21	\$984.54
-	promised 1		did you or anyone else acting on your sor to make payments to your creditors listed on line 16.		nsfer any prope	rty to anyone who
	■ No □ Yes. F	ill in the details.				
	Person W Address	ho Was Paid	Description and value of any proper transferred	•	te payment transfer was ide	Amount of payment
1 i	transferred Include bot Include gifts No	I in the ordinary course of your bus	de as security (such as the granting of a se		-	
	Address	ho Received Transfer	Description and value of property transferred	Describe any p payments rece paid in exchan	ived or debts	Date transfer was made
	Within 10 y beneficiary ■ No	relationship to you rears before you filed for bankruptour rears defore you filed for bankruptour rears before you filed for bankruptour rears before your relationship to you relationship to y	cy, did you transfer any property to a se ection devices.)	elf-settled trust or	similar device	of which you are a
	Name of t		Description and value of the prope	erty transferred		Date Transfer was made

Debtor 1	Natasha	∆nn ∣	Richard	denn
DODIO! I	Ivalasiia		ixiciiai	JOUL

Case number (if known)

Par	t 8: List of Certain Financial Accounts, Inst	ruments, Safe Deposit	Boxes, and Stora	age Units				
 Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, clos sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokers houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Date account was			, ,					
		Last 4 digits of account number	Type of account instrument	or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?							
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, St State and ZIP Code)		escribe the contents	Do you still have it?			
22.	Have you stored property in a storage unit or	place other than your	home within 1 ye	ar before you filed for bankruptc	y?			
	■ No □ Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		escribe the contents	Do you still have it?			
Par	t 9: Identify Property You Hold or Control for	or Someone Else						
23.	Do you hold or control any property that som for someone.	neone else owns? Inclu	ide any property y	you borrowed from, are storing fo	or, or hold in trust			
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, St Code)		escribe the property	Value			
Par	t 10: Give Details About Environmental Infor	mation						
For	the purpose of Part 10, the following definition	ns apply:						
	Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these s	e air, land, soil, surface	water, groundwa					
	Site means any location, facility, or property a to own, operate, or utilize it, including dispos		nvironmental law	, whether you now own, operate,	, or utilize it or used			
	Hazardous material means anything an environment of the material means anything and the material means and the	onmental law defines a	as a hazardous wa	aste, hazardous substance, toxic	substance,			
Rep	ort all notices, releases, and proceedings that	you know about, rega	rdless of when th	ey occurred.				
24.	Has any governmental unit notified you that y	you may be liable or po	tentially liable un	der or in violation of an environn	nental law?			
	No							
	☐ Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code)	Governmental uni Address (Number, St ZIP Code)		Environmental law, if you know it	Date of notice			

Debtor 1	Natasha	Δnn	Richards	۸n
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Case number (if known)

25.	. Have you notified any governmental unit of any release of hazardous material?							
		No						
		Yes. Fi	II in the details.					
		me of si Idress (N	te umber, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State an ZIP Code)	nd	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.							
		No Yes. Fi	ll in the details.					
		ise Title ise Numl	ber		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case
Par	t 11:	Give I	Details About Your Business or	Conn	ections to Any Business			
27.	Wit	hin 4 yea	ars before you filed for bankrupt	tcy, d	id you own a business or have a	ny of	the following connections to any	/ business?
		☐ A so	ole proprietor or self-employed i	n a tr	ade, profession, or other activity	, eith	er full-time or part-time	
		□ A m	ember of a limited liability comp	any (LLC) or limited liability partnersh	nip (L	LP)	
		□Ара	artner in a partnership					
	☐ An officer, director, or managing executive of a corporation							
		☐ An owner of at least 5% of the voting or equity securities of a corporation						
		No. No	ne of the above applies. Go to I	Part 1	2.			
		Yes. Cl	heck all that apply above and fill	l in th	e details below for each busines	s.		
	Ad	Isiness N Idress	Name		escribe the nature of the business		Employer Identification numbe Do not include Social Security	
	(ivu	illiber, otrec	st, only, state and 211 code)	INan	ne of accountant or bookkeeper		Dates business existed	
28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your busines institutions, creditors, or other parties.			nyone about your business? Inclu	ude all financial				
		No Yes. Fi	Il in the details below.					
	Ad	ime Idress imber, Stree	et, City, State and ZIP Code)	Date	e Issued			

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Deptor	Natasha Ann Richardson	Case number (if known)	
Part 12	2: Sign Below		
are true	e and correct. I understand that make	of Financial Affairs and any attachments, and I declare under penalty on ng a false statement, concealing property, or obtaining money or prop p to \$250,000, or imprisonment for up to 20 years, or both.	
/s/ Na	tasha Ann Richardson		
	ha Ann Richardson ure of Debtor 1	Signature of Debtor 2	
Date	November 8, 2021	Date	
Did you	attach additional pages to Your St	tement of Financial Affairs for Individuals Filing for Bankruptcy (Offic	ial Form 107)?
■ No			
☐ Yes			
Did you	ı pay or agree to pay someone who	s not an attorney to help you fill out bankruptcy forms?	
■ No			
☐ Yes.	Name of Person Attach the E	ankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Fo	orm 119).

					_
Fill in this info	rmation to identify your	case and this filing:			
Debtor 1	Natasha Ann Ric				
Debior 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	EASTERN DISTRICT OF N EXEMPTIONS)	IORTH CAROLINA (NC		
C					
Case number					☐ Check if this is an amended filing
Off: c: c E	0 W 10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0				
_	orm 106A/B				
Schedu	ıle A/B: Prop	perty			12/15
Answer every qu	estion.	g, Land, or Other Real Estate Y	On the top of any additional pag	es, write your name and or	ise number (ii known).
1. Do you own o	r have any legal or equitabl	le interest in any residence, bui	ilding, land, or similar property?		
No. Go to P	art 2.				
☐ Yes. Where	e is the property?				
Part 2: Describ	e Your Vehicles				
Part 2. Descrit	e rour venicles				
			cles, whether they are registe		vehicles you own that
someone else d	rives. If you lease a vehic	cle, also report it on Schedule	G: Executory Contracts and L	Inexpired Leases.	
3. Cars, vans,	trucks, tractors, sport u	tility vehicles, motorcycles			
□ No					
_					
Yes					
3.1 Make:	Hyundai	Who has an interes	t in the property? Check one	Do not deduct secured	claims or exemptions. Put
Model:	Elantra	Debtor 1 only	t in the property: Check one		red claims on Schedule D: laims Secured by Property.
Year:	2015	Debtor 2 only			, , ,
		Debtor 1 and Deb	otor 2 only	Current value of the entire property?	Current value of the portion you own?
Other info	ormation:		e debtors and another		
GEICO	Auto Insurance: Poli			¢0.425.00	\$0.405.00
XXXXX	(x18-32	Check if this is of (see instructions)	community property	\$9,425.00	\$9,425.00
3.2 Make:	Ford	Who has an interes:	t in the property? Check one		claims or exemptions. Put
Model:	Escape	■ Debtor 1 only			red claims on Schedule D: laims Secured by Property.
Year:	2009	Debtor 2 only		Current value of the	Current value of the
		5,000 Debtor 1 and Deb	otor 2 only	entire property?	portion you own?
Other info		<u> </u>	e debtors and another		
	Auto Insurance: Poli	су #		#0.400.00	\$0.400.00
XXXXX X	(x18-32	Check if this is o	community property	\$2,460.00	\$2,460.00

Official Form 106A/B Schedule A/B: Property page 1

Debtor 1	Natasha Ann Richardson	Case number	(if known)
	aft, aircraft, motor homes, ATVs and other recreati s: Boats, trailers, motors, personal watercraft, fishing v		ies
■ No			
- 100			
	e dollar value of the portion you own for all of your you have attached for Part 2. Write that number he		
	scribe Your Personal and Household Items		
	vn or have any legal or equitable interest in any of	the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	old goods and furnishings les: Major appliances, furniture, linens, china, kitchenw	are	
Yes	Describe		
	Household Goods		\$335.00
□ No	nics es: Televisions and radios; audio, video, stereo, and d including cell phones, cameras, media players, ga Describe		; music collections; electronic devices
	Television, Stereo and Comp	uter	\$235.00
Examp ■ No	bles of value es: Antiques and figurines; paintings, prints, or other a other collections, memorabilia, collectibles Describe	rtwork; books, pictures, or other art objects; sta	mp, coin, or baseball card collections;
Examp	ent for sports and hobbies es: Sports, photographic, exercise, and other hobby education musical instruments	quipment; bicycles, pool tables, golf clubs, skis	; canoes and kayaks; carpentry tools;
I0. Firear <i>Exam</i> ■ No	Describe ns coles: Pistols, rifles, shotguns, ammunition, and related Describe	equipment	
□ No	s bles: Everyday clothes, furs, leather coats, designer we Describe	ear, shoes, accessories	
	Clothing and Personal		\$400.00
☐ No	y ples: Everyday jewelry, costume jewelry, engagement Describe Jewelry	rings, wedding rings, heirloom jewelry, watches	s, gems, gold, silver
	Jewell y		Ψ30.00

Official Form 106A/B

				(if known)
	lon-farm animals			
	<i>Examples:</i> Dogs, cats, birds, horse I _{No}	: S		
	Yes. Describe			
	Any other personal and househo I No	ld items you did not a	lready list, including any health aids you did r	not list
	· · · ·			
	Yes. Give specific information	•		
	Possible	e Consumer Rights	Claim(s).	1
	Subject	to approval of settle	ement/award by Bankruptcy Court.	
		-	, no specific claims are known at	\$0.00
	present	•		\$0.00
	Househ	old Items		\$500.00
	· · · · · · · · · · · · · · · · · · ·			-
15.	Add the dollar value of all of yo	ur entries from Part 3,	including any entries for pages you have atta	iched \$4.500.00
	for Part 3. Write that number he	re		\$1,520.00
Part 4	4: Describe Your Financial Assets			
Do y	ou own or have any legal or equ	itable interest in any o	of the following?	Current value of the
				portion you own? Do not deduct secured
				claims or exemptions.
40 6	`ach			
16. C	<i>Examples:</i> Money you have in you	r wallet, in your home, iı	n a safe deposit box, and on hand when you file	your petition
	<i>Examples:</i> Money you have in you I No	r wallet, in your home, i	n a safe deposit box, and on hand when you file	your petition
				your petition
	No Yes			your petition
17.	No I Yes Deposits of money			
17.	No I Yes Deposits of money Examples: Checking, savings, or constitutions. If you have	ther financial accounts;		
17. D	No I Yes Deposits of money Examples: Checking, savings, or of institutions. If you have	ther financial accounts;	certificates of deposit; shares in credit unions, but the same institution, list each.	
17. D	No I Yes Deposits of money Examples: Checking, savings, or constitutions. If you have	ther financial accounts;	certificates of deposit; shares in credit unions, but	
17. D	No I Yes Deposits of money Examples: Checking, savings, or of institutions. If you have I No I Yes	ther financial accounts; multiple accounts with	certificates of deposit; shares in credit unions, buthe same institution, list each. Institution name: Net Spend	rokerage houses, and other similar
17. D	No I Yes Deposits of money Examples: Checking, savings, or of institutions. If you have I No I Yes	ther financial accounts; multiple accounts with	certificates of deposit; shares in credit unions, buthe same institution, list each.	
17. D	No I Yes Deposits of money Examples: Checking, savings, or of institutions. If you have I No I Yes	ther financial accounts; multiple accounts with	certificates of deposit; shares in credit unions, buthe same institution, list each. Institution name: Net Spend	rokerage houses, and other similar
17. C	No I Yes Deposits of money Examples: Checking, savings, or or institutions. If you have I No I Yes	ther financial accounts; multiple accounts with	certificates of deposit; shares in credit unions, but the same institution, list each. Institution name: Net Spend (Prepaid Debit Card)	rokerage houses, and other similar
17. D	No I Yes Deposits of money Examples: Checking, savings, or or institutions. If you have I No I Yes	ther financial accounts; multiple accounts with	certificates of deposit; shares in credit unions, but the same institution, list each. Institution name: Net Spend (Prepaid Debit Card)	rokerage houses, and other similar
17. D	No I Yes Deposits of money Examples: Checking, savings, or or institutions. If you have I No I Yes	ther financial accounts; multiple accounts with Prepaid Debit Card traded stocks accounts with brokerage	certificates of deposit; shares in credit unions, but the same institution, list each. Institution name: Net Spend (Prepaid Debit Card) ge firms, money market accounts	rokerage houses, and other similar
17. D	No I Yes Deposits of money Examples: Checking, savings, or or institutions. If you have I No I Yes	ther financial accounts; multiple accounts with	certificates of deposit; shares in credit unions, but the same institution, list each. Institution name: Net Spend (Prepaid Debit Card) ge firms, money market accounts	rokerage houses, and other similar
17. D	No I Yes Deposits of money Examples: Checking, savings, or or institutions. If you have I No I Yes	ther financial accounts; multiple accounts with prepaid Debit Card traded stocks accounts with brokerage stitution or issuer name	certificates of deposit; shares in credit unions, but the same institution, list each. Institution name: Net Spend (Prepaid Debit Card) ge firms, money market accounts	rokerage houses, and other similar
17. D	No I Yes Deposits of money Examples: Checking, savings, or or institutions. If you have I No I Yes	ther financial accounts; multiple accounts with Prepaid Debit Card traded stocks accounts with brokerages stitution or issuer name	certificates of deposit; shares in credit unions, buthe same institution, list each. Institution name: Net Spend (Prepaid Debit Card) ge firms, money market accounts	rokerage houses, and other similar
17. D	No I Yes Deposits of money Examples: Checking, savings, or or institutions. If you have I No I Yes 17.1. I Bonds, mutual funds, or publicly Examples: Bond funds, investment I No I Yes Incorpublicly traded stock and in ipoint venture I No	ther financial accounts; multiple accounts with accounts with traded stocks accounts with brokerage stitution or issuer name terests in incorporated	certificates of deposit; shares in credit unions, buthe same institution, list each. Institution name: Net Spend (Prepaid Debit Card) ge firms, money market accounts	rokerage houses, and other similar
17. D	No I Yes Deposits of money Examples: Checking, savings, or or institutions. If you have institutions. If you have I No I Yes	ther financial accounts; multiple accounts with repaid Debit Card traded stocks accounts with brokerage stitution or issuer name terests in incorporated pout them	certificates of deposit; shares in credit unions, but the same institution, list each. Institution name: Net Spend (Prepaid Debit Card) ge firms, money market accounts c: d and unincorporated businesses, including a	standard sta
17. D	No I Yes Deposits of money Examples: Checking, savings, or or institutions. If you have institutions. If you have I No I Yes	ther financial accounts; multiple accounts with accounts with traded stocks accounts with brokerage stitution or issuer name terests in incorporated	certificates of deposit; shares in credit unions, buthe same institution, list each. Institution name: Net Spend (Prepaid Debit Card) ge firms, money market accounts	standard sta
17. D 18. E 19. N 19. O 20. G	No I Yes Deposits of money Examples: Checking, savings, or or institutions. If you have I No I Yes	ther financial accounts; multiple accounts with accounts with accounts with traded stocks accounts with brokerage stitution or issuer name terests in incorporated pout them	certificates of deposit; shares in credit unions, but the same institution, list each. Institution name: Net Spend (Prepaid Debit Card) ge firms, money market accounts and unincorporated businesses, including a % of owners e and non-negotiable instruments	standard sta
17. D 18. E 19. N j	Peposits of money Examples: Checking, savings, or or institutions. If you have I No I Yes	ther financial accounts; multiple accounts with accounts with accounts with accounts with brokerage accounts with brokerage stitution or issuer name terests in incorporated bout them	certificates of deposit; shares in credit unions, but the same institution, list each. Institution name: Net Spend (Prepaid Debit Card) ge firms, money market accounts acco	standard sta
17. D	Peposits of money Examples: Checking, savings, or or institutions. If you have I No I Yes	ther financial accounts; multiple accounts with accounts with accounts with accounts with brokerage accounts with brokerage stitution or issuer name terests in incorporated bout them	certificates of deposit; shares in credit unions, but the same institution, list each. Institution name: Net Spend (Prepaid Debit Card) ge firms, money market accounts and unincorporated businesses, including a % of owners e and non-negotiable instruments	standard sta
17. D	Peposits of money Examples: Checking, savings, or or institutions. If you have I No I Yes	ther financial accounts; multiple accounts with prepaid Debit Card traded stocks accounts with brokerage stitution or issuer name terests in incorporated bout them	certificates of deposit; shares in credit unions, but the same institution, list each. Institution name: Net Spend (Prepaid Debit Card) ge firms, money market accounts acco	standard sta
17. D	Peposits of money Examples: Checking, savings, or or institutions. If you have I No I Yes	ther financial accounts; multiple accounts with prepaid Debit Card traded stocks accounts with brokerage stitution or issuer name terests in incorporated bout them	certificates of deposit; shares in credit unions, but the same institution, list each. Institution name: Net Spend (Prepaid Debit Card) ge firms, money market accounts acco	standard sta
17. D	Deposits of money Examples: Checking, savings, or or institutions. If you have I No I Yes	ther financial accounts; multiple accounts with prepaid Debit Card traded stocks accounts with brokerage stitution or issuer name terests in incorporated bout them	certificates of deposit; shares in credit unions, but the same institution, list each. Institution name: Net Spend (Prepaid Debit Card) ge firms, money market accounts acco	standard sta
17. D 18. E 19. N	Peposits of money Examples: Checking, savings, or or institutions. If you have I No I Yes	ther financial accounts; multiple accounts with multiple accounts with traded stocks accounts with brokerage stitution or issuer name terests in incorporated bout them	certificates of deposit; shares in credit unions, but the same institution, list each. Institution name: Net Spend (Prepaid Debit Card) ge firms, money market accounts acco	\$500.00 square in an LLC, partnership, and hip:

Official Form 106A/B Schedule A/B: Property page 3

value:

Beneficiary:

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

Yes. Name the insurance company of each policy and list its value.

Company name:

☐ Yes. Give specific information..

31. Interests in insurance policies

No

page 4

Surrender or refund

Debtor 1	Natasha Ann Richardson	Case number (if known)	
If you	terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance polione has died.	icy, or are currently entitled to receive property because	
☐ Yes.	Give specific information		
Examp ■ No —	s against third parties, whether or not you have filed a lawsuit or made a ples: Accidents, employment disputes, insurance claims, or rights to sue Describe each claim	a demand for payment	
	contingent and unliquidated claims of every nature, including countercl	aims of the debtor and rights to set off claims	
■ No		anno or the debtor and rights to set on claims	
	Describe each claim		
35. Any fir ■ No	nancial assets you did not already list		
	Give specific information		
	the dollar value of all of your entries from Part 4, including any entries fo art 4. Write that number here		0.00
Part 5: De	escribe Any Business-Related Property You Own or Have an Interest In. List any re	eal estate in Part 1.	
_ `	own or have any legal or equitable interest in any business-related property?		
No. Go	o to Part 6.		
☐ Yes. 0	Go to line 38.		
	escribe Any Farm- and Commercial Fishing-Related Property You Own or Have an you own or have an interest in farmland, list it in Part 1.	Interest In.	
46. Do yo u	u own or have any legal or equitable interest in any farm- or commercial	fishing-related property?	
■ No.	Go to Part 7.		
☐ Yes	s. Go to line 47.		
Part 7:	Describe All Property You Own or Have an Interest in That You Did Not List Abo	ove	
	u have other property of any kind you did not already list? ples: Season tickets, country club membership		
Yes.	Give specific information		
	.IMPORTANT NOTICES:		
	(1) Valuation Method (Sch. A & B): FMV unles	ss otherwise noted.	
	(2) Creditor claims disclosed on Sch. D, E & I drawn largely from unverified information by and shall not be considered an admission by	ovided by the creditor, the Debtor(s) of the	
	amount owed, interest, late fees, etc. Nor is or representatives an admission by the Debto actual owners of such claims.		\$0.00
	actual owners of such ciallis.		40.00
	Any other value (See * - Sch B)	\$4,	500.00

Official Form 106A/B Schedule A/B: Property page 5

Debtor 1 Natasha Ann Richardson

63. Total of all property on Schedule A/B. Add line 55 + line 62

Case number (if known)

* Any other value, not otherwise listed, including without limitation, any and all amounts on deposit, if any, as of the date of filing, in bank or investment accounts, but not exceeding in value the residual value available under the "wildcard" (NCGS 1C-1601(a)(2)) exemption.

Unknown

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$4,500.00

\$19,905.00

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$11,885.00		
57.	Part 3: Total personal and household items, line 15	\$1,520.00		
58.	Part 4: Total financial assets, line 36	\$2,000.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+\$4,500.00		
62.	Total personal property. Add lines 56 through 61	\$19,905.00	Copy personal property total	\$19,905.00

Official Form 106A/B Schedule A/B: Property page 6

Rev. 3/2016

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NORTH CAROLINA (NC EXEMPTIONS)

IN THE MATTER OF: Natasha Ann Richardson Debtor(s). CASE NUMBER:

SCHEDULE C-1 - PROPERTY CLAIMED AS EXEMPT

ا, <u>Natasha Ann Richardson</u>	, claim the following property as exempt pursuant to 11 U.S.C. § 522 and the laws of the State of North
Carolina, and nonbankruptcy Federal law: (A	

1. NCGS 1C-1601(a)(1) (NC Const., Article X, Section 2) REAL OR PERSONAL PROPERTY USED AS A RESIDENCE OR BURIAL PLOT (The exemption is not to exceed \$35,000; however, an unmarried debtor who is 65 years of age or older is entitled to retain an aggregate interest in the property not to exceed \$60,000 in value so long as the property was previously owned by the debtor as a tenant by the entireties or as a joint tenant with rights of survivorship and the former co-owner of the property is deceased, in which case the debtor must specify his/her age and the name of the former co-owner, if a child use initials only, of the property below).

Description of Property and Address	Market <u>Value</u>	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Mortgage Holder or Lien Holder	Amount of Mortgage <u>or Lien</u>	Net <u>Value</u>	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(1)
-NONE-						
Debtor's Age: Name of former co-owne	er:					

VALUE OF REAL ESTATE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(1): \$ 0.00

2. NCGS 1C-1601(a)(3) MOTOR VEHICLE (The exemption in one vehicle is not to exceed \$3,500).

Model, Year Style of Auto	Market <u>Value</u>	1 (02)0000012	<u>Lien Holder</u>	Amount of <u>Lien</u>	Net <u>Value</u>	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(3)
2009 Ford Escape 205,000 miles GEICO Auto Insurance: Policy # xxxxx xx18-32	2,460.00		Motomax Financial	560.42	1,899.58	1,899.58

VALUE OF MOTOR VEHICLE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(3): \$ 1,899,58

3. NCGS 1C-1601(a)(4) (NC Const., Article X, Section 1) PERSONAL OR HOUSEHOLD GOODS (The debtor's aggregate interest is not to exceed \$5,000 plus \$1,000 for each dependent of the debtor, not to exceed \$4,000 total for dependents). The number of dependents for exemption purposes is **0**.

Description of Property	Market <u>Value</u>	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Lien <u>Holder</u>	Amount <u>of Lien</u>	Net <u>Value</u>	Claimed as Exempt Pursuant to NCGS 1C-1601(a)(4)
Clothing and Personal	400.00				400.00	400.00
Household Goods	335.00				335.00	335.00
Household Items	500.00		Conn's Credit Corp	279.01	220.99	220.99
Jewelry	50.00				50.00	50.00
Television, Stereo and Computer	235.00				235.00	235.00

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(4): \$ 1,240.99

4. NCGS 1C-1601(a)(5) TOOLS OF TRADE (The debtor's aggregate interest is not to exceed \$2,000 in value).

	Owner (D1)Debtor 1				
		Lien	Amount of	Net	Value Claimed as Exempt
Description	 (J)Joint	<u>Holder</u>	<u>Lien</u>	<u>Value</u>	Pursuant to NCGS 1C-1601(a)(5)

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Description	Market <u>Value</u>	Lien <u>Holder</u>	Amount of <u>Lien</u>	Net <u>Value</u>	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(5)
-NONE-					

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(5): \$ 0.00

5. NCGS 1C-1601(a)(6) LIFE INSURANCE (NC Const., Article X, Section 5).

Description\Insured\Last Four Digits of Policy Number\Beneficiary(if child, initials only)	Cash Value
-NONE-	

6. NCGS 1C-1601(a)(7) PROFESSIONALLY PRESCRIBED HEALTH AIDS (For Debtor or Debtor's Dependents, no limit on value).

Description
-NONE-

7. NCGS 1C-1601(a)(8) COMPENSATION FOR PERSONAL INJURY, INCLUDING COMPENSATION FROM PRIVATE DISABILITY POLICIES OR ANNUITIES, OR COMPENSATION FOR DEATH OF A PERSON UPON WHOM THE DEBTOR WAS DEPENDENT FOR SUPPORT. COMPENSATION NOT EXEMPT FROM RELATED LEGAL, HEALTH OR FUNERAL EXPENSE.

Description AND Source of Compensation, Including Name (If child, initials only) & Last Four Digits of Account Number of any Disability Policy/Annuity -NONE-

8. NCGS 1C-1601(a)(2) ANY PROPERTY (Debtor's aggregate interest in any property is not to exceed \$5,000 in value of any unused exemption amount to which the debtor is entitled under NCGS 1C-1601(a)(1)).

Description of Property and Address	Market <u>Value</u>	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Lien <u>Holder</u>	Amount of Lien	Net <u>Value</u>	
2015 Hyundai Elantra 150,000 miles GEICO Auto Insurance: Policy # xxxxx xx18-32	9,425.00		Exeter Finance Corporation**	12,727.21	0.00	0.00
Any other value (See * - Sch B)	4,500.00				4,500.00	4,500.00
Prepaid Debit Card: Net Spend (Prepaid Debit Card)	500.00				500.00	500.00

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(2): \$ 5,000.00

9. NCGS 1C-1601(a)(9) and 11 U.S.C. § 522 INDIVIDUAL RETIREMENT PLANS & RETIREMENT FUNDS, as defined in the Internal Revenue Code, and any plan treated in the same manner as an individual retirement plan, including individual retirement accounts and Roth retirement accounts as described in §§ 408(a) and 408A of the Internal Revenue Code, individual retirement annuities as described in § 408(b) of the Internal Revenue Code, accounts established as part of a trust described in § 408(c) of the Internal Revenue Code, and funds in an account exempt from taxation under § 401, 403, 408, 408A, 414, 457, or 510(a) of the Internal Revenue Code. For purposes of this subdivision, "Internal Revenue Code" means Code as defined in G.S. 105-228.90.

Type of Account\Location of Account\Last Four Digits of Account Number

Profit-Sharing Plan: BMO Retirement

10. NCGS 1C-1601(a)(10) FUNDS IN A COLLEGE SAVINGS PLAN, as qualified under § 529 of the Internal Revenue Code, and that are not otherwise excluded from the estate pursuant to 11 U.S.C. §§ 541(b)(5)-(6), (e), not to exceed a cumulative limit of \$25,000. If funds were placed in a college savings plan within the 12 months prior to filing, the contributions must have been made in the ordinary course of the debtor's financial affairs and must have been consistent with the debtor's past pattern of contributions. The exemption applies to funds for a child of the debtor that will actually be used for the child's college or university expenses.

College Savings Plan\Last Four Digits of Account Number\Value\Initials of Child Beneficiary

-NONE-

11. NCGS 1C-1601(a)(11) RETIREMENT BENEFITS UNDER THE RETIREMENT PLANS OF OTHER STATES AND GOVERNMENTAL
UNITS OF OTHER STATES (The debtor's interest is exempt only to the extent that these benefits are exempt under the laws of the state or
governmental unit under which the benefit plan is established).

Name of Retirement Plan\State Governmental Unit\Last Four Digits of Identifying Number
-NONE-

12. NCGS 1C-1601(a)(12) ALIMONY, SUPPORT, SEPARATE MAINTENANCE, AND CHILD SUPPORT PAYMENTS OR FUNDS THAT HAVE BEEN RECEIVED OR TO WHICH THE DEBTOR IS ENTITLED (The debtor's interest is exempt to the extent the payments or funds are reasonably necessary for the support of the debtor or any dependent of the debtor).

Type of Support\Amount\Location of Funds
Type of eupportvariounitizedation of 1 unds
-NONE-
-NONE-

13. TENANCY BY THE ENTIRETY. The following property is claimed as exempt pursuant to 11 U.S.C. § 522 and the law of the State of North Carolina pertaining to property held as tenants by the entirety.

Description of	Market	Lien	Amount	Net
Property and Address	<u>Value</u>	<u>Holder</u>	<u>of Lien</u>	<u>Value</u>
-NONE-				

VALUE CLAIMED AS EXEMPT: \$ 0.00

14. NORTH CAROLINA PENSION FUND EXEMPTIONS

-NONE-	
 15. OTHER EXEMPTIONS CLAIMED UNDER LAWS OF THE STATE OF NORTH CAROLINA	
-NONE-	
40. FEDERAL BENGION FUND EVENDTIONS	
 16. FEDERAL PENSION FUND EXEMPTIONS	
-NONE-	

17. OTHER EXEMPTIONS CLAIMED UNDER NONBANKRUPTCY FEDERAL LAW

-NONE-	

- 18. RECENT PURCHASES
- (a). List tangible personal property purchased by the debtor within ninety (90) days of the filing of the bankruptcy petition.

Description	Market <u>Value</u>	Amount <u>of Lien</u>	Net <u>Value</u>
-NONE-			

(b). List any tangible personal property from 18(a) that is directly traceable to the liquidation or conversion of property that may be exempt and that was not acquired by transferring or using additional property.

Description of Replacement Property	Description of Property Liquidated or Converted that May Be Exempt

- 19. The debtor's property is subject to the following claims:
- a. Of the United States or its agencies as provided by federal law.
- b. Of the State of North Carolina or its subdivisions for taxes, appearance bonds or fiduciary bonds;
- Of a lien by a laborer for work done and performed for the person claiming the exemption, but only as to the specific property affected. C.
- Of a lien by a mechanic for work done on the premises, but only as to the specific property affected. d.
- For payment of obligations contracted for the purchase of specific real property affected. e.
- For contractual security interests in specific property affected; provided, that the exemptions shall apply to the debtor's household goods f. notwithstanding any contract for a nonpossessory, nonpurchase money security interest in any such goods.
- For statutory liens, on the specific property affected, other than judicial liens. q.
- For child support, alimony or distributive award order pursuant to Chapter 50 of the General Statutes of North Carolina. h.
- For criminal restitution orders docketed as civil judgments pursuant to G.S. 15A-1340.38. i.
- Debts of a kind specified in 11 U.S.C. § 523(a)(1) (certain taxes), (5) (domestic support obligations). j.
- Debts of a kind specified in 11 U.S.C. § 522(c). k.

Natasha Ann Richardson

Claimant	Nature of	Amount of	Description of	Value	Net
	Claim	Claim	Property	of Property	<u>Value</u>
-NONE-					

None of the property listed in paragraph 18(a), except qualified replacement property under 18(b), has been included in this claim of exemptions.

None of the claims listed in paragraph 19 is subject to this claim of exemptions.

I declare that to the extent any exemptions I have claimed appear on its face to exceed the amount allowed by the applicable statute, I claim only the maximum amount allowed by statute.

UNSWORN DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF INDIVIDUAL TO SCHEDULE C-1 - PROPERTY CLAIMED AS EXEMPT

I,	Natasha Ann Richardson ,	declare under penalty of perjury that I have read the foregoing Schedule C-1 - Property Claimed as
Exempt, consis	sting of 4 sheets, and that they are t	rue and correct to the best of my knowledge, information and belief.
Executed on:	November 8, 2021	/s/ Natasha Ann Richardson
		Natasha Ann Pichardson

Debtor

Fill in this infor					
	mation to identify you	r case:			
Debtor 1	Natasha Ann Rio	chardson			
	First Name	Middle Name Last Name		-	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name Last Name		-	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT OF NORTH CAROLINA EXEMPTIONS)	A (NC	-	
Case number					
(if known)				☐ Check	if this is an
					led filing
					3
Official Forr	m 106D				
		Who Have Claims Secured	l by Proport	V	12/15
<u> 3Criedule</u>	D. Creditors	Wild have Claims Secured	by Propert	<u>y </u>	12/13
	e Additional Page, fill it o	f two married people are filing together, both are equout, number the entries, and attach it to this form. On			
1. Do anv creditors	s have claims secured by	your property?			
, , , , , , , , , , , , , , , , , , , ,		7 · · · · · · · · ·			
□ No Chac	k this hav and submit th	nis form to the court with your other schedules. Vo	u have nothing else t	to report on this form	
_		nis form to the court with your other schedules. Yo	u have nothing else	to report on this form.	
_	k this box and submit the nall of the information b	•	u have nothing else	to report on this form.	
Yes. Fill i		•		·	
Yes. Fill in	n all of the information b	•	u have nothing else	to report on this form. Column B	Column C
Yes. Fill in Part 1: List A 2. List all secured for each claim. If r	n all of the information ball Secured Claims I claims. If a creditor has more than one creditor has	nore than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As	Column A Amount of claim	Column B Value of collateral	Unsecured
Yes. Fill in Part 1: List A 2. List all secured for each claim. If r	n all of the information ball Secured Claims I claims. If a creditor has more than one creditor has	pelow.	Column A Amount of claim Do not deduct the	Column B Value of collateral that supports this	Unsecured portion
Yes. Fill in Part 1: List A 2. List all secured for each claim. If r much as possible,	n all of the information ball Secured Claims I claims. If a creditor has more than one creditor has list the claims in alphabetic	nore than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As all order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Unsecured portion If any
Yes. Fill in Part 1: List A 2. List all secured for each claim. If r much as possible,	n all of the information ball Secured Claims I claims. If a creditor has more than one creditor has list the claims in alphabetic credit Corp	nore than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As all order according to the creditor's name. Describe the property that secures the claim:	Column A Amount of claim Do not deduct the	Column B Value of collateral that supports this	Unsecured portion
Yes. Fill in Part 1: List A 2. List all secured for each claim. If r much as possible, 2.1 Conn's C	n all of the information ball Secured Claims I claims. If a creditor has more than one creditor has list the claims in alphabetic credit Corp	nore than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As all order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Unsecured portion If any
Yes. Fill in Part 1: List A 2. List all secured for each claim. If r much as possible, 2.1 Conn's C	n all of the information ball Secured Claims I claims. If a creditor has more than one creditor has list the claims in alphabetic credit Corp	nore than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As all order according to the creditor's name. Describe the property that secures the claim: Household Items	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Unsecured portion If any
Yes. Fill in Part 1: List A 2. List all secured for each claim. If r much as possible, Creditor's Nam Attn: Offi	n all of the information ball Secured Claims I claims. If a creditor has more than one creditor has list the claims in alphabetic credit Corp	nore than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As all order according to the creditor's name. Describe the property that secures the claim: Household Items As of the date you file, the claim is: Check all that	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Unsecured portion If any
Yes. Fill in Part 1: List A 2. List all secured for each claim. If r much as possible, Creditor's Nam Attn: Offin Post Office Attn: Office Attn: Offin Post Office Attn: Offin Post Office Attn: Offin Post Office Attn: Offin Post Office Attn: O	n all of the information ball Secured Claims I claims. If a creditor has more than one creditor has list the claims in alphabetic credit Corp	nore than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name. Describe the property that secures the claim: Household Items As of the date you file, the claim is: Check all that apply.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Unsecured portion If any
Part 1: List A 2. List all secured for each claim. If r much as possible, 2.1 Conn's C Creditor's Nam Attn: Offic Post Offic Beaumor	n all of the information by the secured Claims. It claims. If a creditor has more than one creditor has list the claims in alphabetic credit Corp The secured Corp The secur	nore than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name. Describe the property that secures the claim: Household Items As of the date you file, the claim is: Check all that apply. Contingent	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Unsecured portion If any
Part 1: List A 2. List all secured for each claim. If r much as possible, 2.1 Conn's C Creditor's Nam Attn: Offic Post Offic Beaumor	n all of the information ball Secured Claims I claims. If a creditor has more than one creditor has list the claims in alphabetic credit Corp ne	nore than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As all order according to the creditor's name. Describe the property that secures the claim: Household Items As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Unsecured portion If any
Part 1: List A 2. List all secured for each claim. If r much as possible, 2.1 Conn's C Creditor's Nam Attn: Offic Post Offic Beaumor	n all of the information by the secured Claims. If a creditor has more than one creditor has list the claims in alphabetic credit Corpone icer ice Box 2358 nt, TX 77704 et, City, State & Zip Code	nore than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name. Describe the property that secures the claim: Household Items As of the date you file, the claim is: Check all that apply. Contingent	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Unsecured portion If any
Yes. Fill in Part 1: List A 2. List all secured for each claim. If r much as possible, Creditor's Nam Attn: Offin Post Offin Beaumor Number, Stree Who owes the delay and the secure of the se	n all of the information by the secured Claims. If a creditor has more than one creditor has list the claims in alphabetic credit Corpone icer icer ice Box 2358 nt, TX 77704 et, City, State & Zip Code	nore than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name. Describe the property that secures the claim: Household Items As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	Column A Amount of claim Do not deduct the value of collateral. \$279.01	Column B Value of collateral that supports this claim	Unsecured portion If any
Yes. Fill in Part 1: List A 2. List all secured for each claim. If r much as possible, Creditor's Nam Attn: Offin Post Offin Beaumor Number, Street Who owes the design of the post of the pos	n all of the information by the secured Claims. If a creditor has more than one creditor has list the claims in alphabetic credit Corpone icer icer ice Box 2358 nt, TX 77704 et, City, State & Zip Code	nore than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name. Describe the property that secures the claim: Household Items As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply.	Column A Amount of claim Do not deduct the value of collateral. \$279.01	Column B Value of collateral that supports this claim	Unsecured portion If any
Yes. Fill in Part 1: List A 2. List all secured for each claim. If n much as possible, Creditor's Nam Attn: Offin Beaumor Number, Street Who owes the d Debtor 1 only Debtor 2 only	n all of the information by All Secured Claims I claims. If a creditor has more than one creditor has list the claims in alphabetic credit Corp The sicer The ce Box 2358 The corp of the corp of the corp of the claims in alphabetic credit Corp The corp of the	nore than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name. Describe the property that secures the claim: Household Items As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured)	Column A Amount of claim Do not deduct the value of collateral. \$279.01	Column B Value of collateral that supports this claim	Unsecured portion If any
Yes. Fill in Part 1: List A 2. List all secured for each claim. If r much as possible, Creditor's Nam Attn: Offin Beaumor Number, Street Who owes the d Debtor 1 only Debtor 2 only Debtor 1 and D	n all of the information by All Secured Claims I claims. If a creditor has more than one creditor has list the claims in alphabetic credit Corp The sicer The ce Box 2358 The corp of the	nore than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As call order according to the creditor's name. Describe the property that secures the claim: Household Items As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or sections)	Column A Amount of claim Do not deduct the value of collateral. \$279.01	Column B Value of collateral that supports this claim	Unsecured portion If any

Date debt was incurred

Last 4 digits of account number

Deb	Debtor 1 Natasha Ann Richardson			Case number (if known)			
	First Name Middle Na	ame Last Name					
2.2	Exeter Finance Corporation**	Describe the property that secures	the claim:	\$12,727.21	\$9,425.00	\$3,302.21	
	Creditor's Name Attn:Officer	2015 Hyundai Elantra 150,0 GEICO Auto Insurance: Pol xxxxx xx18-32					
	Post Office Box 166097 Irving, TX 75016	As of the date you file, the claim is: apply. Contingent	Check all that				
	Number, Street, City, State & Zip Code	☐ Unliquidated					
Who	o owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.					
_	Debtor 1 only	An agreement you made (such as car loan)	mortgage or secur	ed			
	Debtor 2 only	_					
	Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)				
	At least one of the debtors and another Check if this claim relates to a	☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)	Purchase Mo	oney Security Interest			
•	community debt	cure (measurg a right to enect)					
Date	e debt was incurred 2015	Last 4 digits of account num	ber				
2.3	Motomax Financial	Describe the property that secures	the claim:	\$560.42	\$2,460.00	\$0.00	
	Creditor's Name	2009 Ford Escape 205,000 i GEICO Auto Insurance: Pol					
	Attn: Officer 216 13th Street	xxxxx xx18-32 As of the date you file, the claim is:					
	Columbus, GA 31901	apply. Contingent					
	Number, Street, City, State & Zip Code	☐ Unliquidated					
Who	o owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.					
	Debtor 1 only	An agreement you made (such as mortgage or secured car loan)					
	Debtor 2 only	_					
	Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, me	echanic's lien)				
	At least one of the debtors and another	Judgment lien from a lawsuit	Burchasa Ma	nov Courity Interact			
	Check if this claim relates to a community debt	Other (including a right to offset)	Purchase wic	oney Security Interest			
Date	e debt was incurred	Last 4 digits of account num	ber				
	ld the dollar value of your entries in C			\$13,566.64			
Wr	rite that number here:			\$13,566.64			
Part	List Others to Be Notified fo	r a Debt That You Already Listed	ı				
tryin than	this page only if you have others to b ig to collect from you for a debt you o lone creditor for any of the debts that is in Part 1, do not fill out or submit th	we to someone else, list the creditor you listed in Part 1, list the addition	in Part 1, and the	n list the collection agency he	ere. Similarly, if yo	u have more	
[]	Name, Number, Street, City, State &	Zip Code	On which	line in Part 1 did you enter the	creditor? 2.3		
	Capital Asset Recovery PO Box 192585 Dallas, TX 75219		Last 4 digi	its of account number			

Fill in this in	nformation to identify your	case:						
Debtor 1	Natasha Ann Rich	ardson						
Debior 1	First Name	Middle Nar	me	Last Name	e			
Debtor 2								
(Spouse if, filing)	First Name	Middle Nar	me	Last Name	Э			
United States	s Bankruptcy Court for the:	EASTERN D EXEMPTION	ISTRICT OF N IS)	ORTH CARC	DLINA (NC			
Case numbe	ır							
(if known)							☐ Check	if this is an
							amend	ded filing
O#:-:-! F	400E/E							
	orm 106E/F							4044
	e E/F: Creditors W e and accurate as possible. Us							12/15
Schedule D: C left. Attach the	xecutory Contracts and Unexp reditors Who Have Claims Sec Continuation Page to this page number (if known).	ured by Property	y. If more space	is needed, co	py the Part	you need, fill it out,	number the entries i	in the boxes on the
Part 1: Li	st All of Your PRIORITY Un	secured Claim	าร					
1. Do any cr	editors have priority unsecure	d claims against	you?					
☐ No. Go	to Part 2.							
Yes.								
identify wh possible, I	your priority unsecured claims nat type of claim it is. If a claim ha ist the claims in alphabetical orde nore than one creditor holds a pa	as both priority and er according to the	d nonpriority ame e creditor's name	ounts, list that on the counts, list that one of the counts in the count	laim here a	nd show both priority a	and nonpriority amour	nts. As much as
(For an ex	planation of each type of claim, s	see the instruction	ns for this form in	the instruction	booklet.)			
						Total claim	Priority amount	Nonpriority amount
2.1 Law	Office of John T Orcutt	Las	st 4 digits of acc	count number		\$6,813.00	\$6,813.00	\$0.00
	ty Creditor's Name					· • • • • • • • • • • • • • • • • • • •		- ·
	6 Six Forks Road	Wh	en was the deb	t incurred?	10/2021		_	
	e 203 eigh, NC 27615							
	ber Street City State Zip Code	As	of the date you	file, the claim	is: Check a	II that apply		
Who inc	curred the debt? Check one.		Contingent					
■ Debte	or 1 only		Unliquidated					
☐ Debto	or 2 only		Disputed					
☐ Debto	or 1 and Debtor 2 only		e of PRIORITY	unsecured cla	im:			
	ast one of the debtors and anothe	,	Domestic suppo	rt obligations				
	ck if this claim is for a commun	,	Taxes and certa	· ·	ou owe the	government		
	ck if this claim is for a commur aim subject to offset?	,		-		u were intoxicated		
■ No	ann subject to onset?		Other. Specify	-				
☐ Yes		_	Onier. Specify	Attorney F				-
00								

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Debto	¹ Natasha Ann Richardson		Case numb	oer (if known)		
2.2	North Carolina Dept. of Revenue** Priority Creditor's Name	Last 4 digits of account number		\$3,064.37	\$3,064.37	\$0.00
	Post Office Box 1168 Raleigh, NC 27602-1168	When was the debt incurred?	2012, 2015	, 2016		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all tha	it apply		
٧	Vho incurred the debt? Check one.	☐ Contingent				
ı	Debtor 1 only	☐ Unliquidated				
[Debtor 2 only	☐ Disputed				
[Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cl	aim:			
[☐ At least one of the debtors and another	☐ Domestic support obligations				
	Check if this claim is for a community debt sthe claim subject to offset?	■ Taxes and certain other debts□ Claims for death or personal in	, ,			
	No	Other. Specify				
	☐Yes	State Inco	me Taxes			
4. Lis	Yes. Stall of your nonpriority unsecured claims in the secured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other int 2.	alphabetical order of the creditor aim. For each claim listed, identify w	who holds each hat type of claim	it is. Do not list claim	s already included in ns fill out the Continua	Part 1. If more ation Page of
					Total o	laim
4.1	.IMPORTANT NOTICE:	Last 4 digits of account numl	oer			\$0.00
	Nonpriority Creditor's Name See notice re: creditor claims set forth on Schedule A	When was the debt incurred?				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the cla	aim is: Check all	that apply		
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsec	ured claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a report as priority claims	separation agree	ment or divorce that y	you did not	
	No	Debts to pension or profit-sl	naring plans, and	other similar debts		
	☐ Yes	Other. Specify	3, 2, 2,			

Debtor	1 Natasha Ann Richardson	Case number (if known)				
4.2	American Credit Acceptance, LLC	Last 4 digits of account number	Unknown			
	Nonpriority Creditor's Name Attn: Officer/Bankruptcy Department	When was the debt incurred?				
	961 East Main Street Spartanburg, SC 29302 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	_				
	Debtor 1 only	Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No ☐ Yes	Type of NONPRIORITY unsecured claim:				
		Student loans				
		☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
		Debts to pension or profit-sharing plans, and other similar debts				
		■ Other. Specify Possible Obligation				
4.3	Capital One	Last 4 digits of account number	\$339.00			
	Nonpriority Creditor's Name Post Office Box 30285 Salt Lake City, UT 84130-0285	When was the debt incurred? 2015				
-	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	Contingent				
	Debtor 2 only	Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	Other. Specify Credit Card Purchases				
4.4	Charlotte Metro Credit	Last 4 digits of account number	\$359.00			
	Nonpriority Creditor's Name 718 Central Ave Charlotte, NC 28204	When was the debt incurred? 2021				
-	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Overdraft				

Debtor	1 Natasha Ann Richardson	Case number (if known)		
4.5	Concord Utility Department	Last 4 digits of account number	\$88.00	
	Nonpriority Creditor's Name 35 Cabarrus Avenue West Concord, NC 28025	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other Specify Collection Account		
4.6	Duko Brogross Energy	Last 4 digits of account number	\$283.00	
4.0	Nonpriority Creditor's Name		\$203.UU	
	Post Office Box 1771 Raleigh, NC 27602	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify Collection Account		
4.7	Federal Loan Servicing	Last 4 digits of account number	\$40,234.72	
,	Nonpriority Creditor's Name P.O. Box 60610	When was the debt incurred? 2008	. ,	
	Harrisburg, PA 17106 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	■ Student loans		
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims		
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	Other. Specify		
		Student Loans		

Debtor	Natasha Ann Richardson	Case number (if known)				
4.8	FFCC Columbus Inc.	Last 4 digits of account number	\$48.00			
	Nonpriority Creditor's Name 1550 Old Henderson Road STE 5100 Columbus, OH 43220-3626	When was the debt incurred?	Ψ+0.00			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
		\square Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Collection Account				
4.9	First Premier Bank Nonpriority Creditor's Name	Last 4 digits of account number	\$450.00			
	Post Office Box 5524 Sioux Falls, SD 57117-5524	When was the debt incurred? 2015				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Credit Card Purchases				
4.1 0	First Premier Bank	Last 4 digits of account number	\$100.00			
	Nonpriority Creditor's Name Post Office Box 5524	When was the debt incurred? 2021				
	Sioux Falls, SD 57117-5524 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	,				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	\square Debts to pension or profit-sharing plans, and other similar debts				
	☐Yes	■ Other. Specify Credit Card Purchases				

Debt	or 1 Natasha Ann Richardson	Case number (if known)				
4.1	Geico		Unknown			
1	Nonpriority Creditor's Name	Last 4 digits of account number	Olikilowii			
	Regional Office	When was the debt incurred?				
	One GEICO Center					
	Macon, GA 31296-0001	As of the date you file the elements OL				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Possible Obligation/Car Accident				
		- Other. Specify				
4.1	George Brown Associates, Inc.	Lock & digital of account country	\$444.00			
2	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ444.00			
	2200 Crown Point Executive Drive Charlotte, NC 28227	When was the debt incurred?				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Collection Account				
4.1 3	Gulf Coast Collection	Last 4 digits of account number	\$59.00			
	Nonpriority Creditor's Name 56300 Marquesas Circle	When was the debt incurred? 2021				
	Sarasota, FL 34233	when was the dept incurred?				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	•				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	<u> </u>	☐ Student loans				
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts				
	□ Yes	Other Chasity Collection Account				

Natasha Ann Richardson	Case number (if known)	
Hawthorne at the Greene	Last 4 digits of account number	\$1,991.00
Nonpriority Creditor's Name 13625 Haven Ridge Lane Charlotte, NC 28215	When was the debt incurred?	41,00110
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Collection Account	
Integra Springs at Kellswater	Last 4 digits of account number	\$3,849.52
Nonpriority Creditor's Name		ψο,ο .ο.ο.
4800 Integra Springs Boulevard Kannapolis, NC 28081	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
No		
Yes	■ Other. Specify Collection Account	
Internal Revenue Service (ED)**	Last 4 digits of account number	\$10,631.15
Nonpriority Creditor's Name Post Office Box 7346	When was the debt incurred? 2011	
Philadelphia, PA 19101-7346 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset? ■	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
■ No		
□ Yes	■ Other. Specify Federal Income Taxes	

Natasha Ann Richardson	Case number (if known)	
Jon Barry & Associates	Last 4 digits of account number	\$709.00
Nonpriority Creditor's Name PO Box 127	When was the debt incurred?	Ψ103.00
Concord, NC 28026		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Collection Account	
KLS Financial	Last 4 digits of account number	\$59.00
Nonpriority Creditor's Name		*
991 Aviation Pkwy #300 Morrisville, NC 27560	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
■ No	Other. Specify Collection Account	
Kross, Lieberman and Stone, Inc Nonpriority Creditor's Name	Last 4 digits of account number	\$133.00
P.O. Box 565	When was the debt incurred?	
Morrisville, NC 27560-0565		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
_	По и	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
Check if this claim is for a community debt		
Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other Specify Collection Account	
	— Other, Specify	

Debtor	1 Natasha Ann Richardson	Case number (if known)	
4.2			
0	Leonard Aluminum Utility Buildings	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name 630 West Inependence Blvd. Suite 3	When was the debt incurred?	
	Mount Airy, NC 27030 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Rejected Executory Contract/Leases	
4.2	Liberty University	Last 4 digits of account number	\$1,930.00
	Nonpriority Creditor's Name 1971 University Boulevard	When was the debt incurred?	
	Lynchburg, VA 24502 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collection Account	
4.2	LVNV Funding	Last 4 digits of account number	\$6.375.00
	Nonpriority Creditor's Name		. ,
	55 Beattie Place Suite 110	When was the debt incurred?	
Number Street City St Who incurred the de	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	_		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	∏ Yes	Other Specify Collection Account	

Debt	or 1 Natasha Ann Richardson	Case number (if known)					
4.2	LVAN/ Franchises		¢40 707 04				
3	LVNV Funding Nonpriority Creditor's Name	Last 4 digits of account number	\$12,727.21				
	55 Beattie Place Suite 110	When was the debt incurred?					
	Greenville, SC 29601						
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify Collection Account					
4.2	Nathan Schlosser		Unknown				
4	Nonpriority Creditor's Name	Last 4 digits of account number	Ulikilowii				
	16 E 1st Street	When was the debt incurred?					
	Wendell, NC 27591						
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify Possible Obligation/Car Accident					
4.2	Night & Day Dental		\$59.00				
5	Nonpriority Creditor's Name	Last 4 digits of account number	439.00				
	3500 N. Duke Street Durham, NC 27704	When was the debt incurred?					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims					
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts					
	Πyes	Other Chesits Medical Bills					

Natasha Ann Richardson	Case number (if known)					
North Carolina Dept. of Revenue**	Last 4 digits of account number	\$6,136.67				
Nonpriority Creditor's Name Post Office Box 1168	When was the debt incurred? 2011	ψο, 130.01				
Raleigh, NC 27602-1168 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
Debtor 1 only	☐ Contingent					
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed					
☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
■ No □ Yes	□ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify State Income Taxes					
Professional Debt	Last 4 digits of account number	\$787.87				
Nonpriority Creditor's Name 4161 Carmichael Avenue, Ste 201 Jacksonville, FL 32207	When was the debt incurred?					
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
■ Debtor 1 only	☐ Contingent					
☐ Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
■ No	Debts to pension or profit-sharing plans, and other similar debts					
Yes	Other. Specify Collection Account					
RMB of North Carolina, Inc.	Last 4 digits of account number	\$173.00				
Nonpriority Creditor's Name 409 Bearden Park Circle Knoxville, TN 37919	When was the debt incurred?					
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
■ Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
☐ Check if this claim is for a community	Student loans					
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
■ No	Debts to pension or profit-sharing plans, and other similar debts					
□Yes	■ Other. Specify Collection Account					

Debt	or 1 Natasha Ann Richardson	Case number (if known)					
4.2 9	State Employees' Credit Union	Last 4 digits of account number	\$2,194.93				
	Nonpriority Creditor's Name Attn: Officer Post Office Box 25279	When was the debt incurred? 2016					
	Raleigh, NC 27611 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	Поли					
	_	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:					
	☐ At least one of the debtors and another	Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify Installment Loan					
4.3	State Employees' Credit Union	Last 4 digits of account number	\$396.49				
0	Nonpriority Creditor's Name		4000.10				
	Attn: Officer	When was the debt incurred? 2016					
	Post Office Box 25279 Raleigh, NC 27611						
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify Installment Loan					
4.3 1	TekCollect	Last 4 digits of account number	\$48.00				
	Nonpriority Creditor's Name Post Office Box 1269 Columbus, OH 43216	When was the debt incurred?					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	□ Yes	■ Other. Specify Collection Account					
		— Outer, Specify					

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Debto	Natasha Ann Richardson	Case number (if known)				
4.3	T		* 400.00			
2	Time Warner Cable aka Spectrum	Last 4 digits of account number	\$109.00			
	Nonpriority Creditor's Name 101 Innovation Avenue	When was the debt incurred?				
	Suite 100					
	Morrisville, NC 27560-8586 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	The of the date year me, are claim to. Officer an that apply				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Collection Account				
4.3						
3	UNC Health Care Nonpriority Creditor's Name	Last 4 digits of account number	\$543.60			
	Customer Service	When was the debt incurred?				
	PO Box 168					
	Chapel Hill, NC 27514	-				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	□ Constitution				
	Debtor 2 only	☐ Contingent ☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:				
	At least one of the debtors and another	☐ Student loans				
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Medical Bills				
4.3	Moddington Family Mod		¢60.00			
4	Weddington Family Med Nonpriority Creditor's Name	Last 4 digits of account number	\$60.00			
	8930 Blakeney Professional Drive Charlotte, NC 28277	When was the debt incurred?				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not				
	No	report as priority claims Debts to pension or profit-sharing plans, and other similar debts				
	■ No □ Yes					
	□ res	Other. Specify Medical Bills				

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Natasha Ann Richardson		Case number (if known)
Name and Address Absolute Collection Service 421 Fayetteville Street Mall Suite 600		u list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Raleigh, NC 27601	Last 4 digits of account number	
Name and Address Absolute Collections Service 421 Fayetteville Street Mall Suite 600 Raleigh, NC 27601	I	u list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address American Credit P.O. Box 204531 Dallas, TX 75320		u list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address American Credit Acceptance ATTN: OFFICER 340 East Main Street, Suite 400 Spartanburg, SC 29302		u list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?
Capital One Post Office Box 85015 Richmond, VA 23285-5075	Line 4.3 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Focus Financial Services 3800 S. Congress Avenue Boynton Beach, FL 33426	1	u list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address GEICO Post Office Box 23356 Pittsburgh, PA 15222-3356		u list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Hunter Warfield, Inc. 4620 Woodland Corporate Boulevard Tampa, FL 33614-2415		u list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?
IC Systems Post Office Box 64378 Saint Paul, MN 55164-0378	Line <u>4.32</u> of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Interstate Credit Collections 711 Coliseum Plaza Court Winston Salem, NC 27106	1	u list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address KLS Financial Services PO BOX 565 Morrisville, NC 27560		u list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	•	

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Debtor 1 Natasha Ann Richardson	Case number (if known)
Name and Address National Credit Systems 117 East 24th Street New York, NY 10010	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.15 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
1611,111,111	Last 4 digits of account number
Name and Address National Credit Systems 3750 Naturally Fresh Blvd Atlanta, GA 30349	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.15 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number
Name and Address NC Department of Justice for NC Department of Revenue Post Office Box 629 Raleigh, NC 27602-0629	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.26 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number
Name and Address NC Department of Justice for NC Department of Revenue Post Office Box 629 Raleigh, NC 27602-0629	On which entry in Part 1 or Part 2 did you list the original creditor? Line 2.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Online Information Services 685 W. Fire Tower Rd.	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.6 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Winterville, NC 28590	Last 4 digits of account number
Name and Address Optimum Outcomes Inc Post Office Box 58015 Raleigh, NC 27658	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.18 of (Check one):
Name and Address Spectrum PO BOX 4617 Carol Stream, IL 60197-4617	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.32 of (Check one):
Name and Address Spectrum Post Office Box 2553 Columbus, OH 43216-2553	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.32 of (Check one):
Name and Address TekCollect Post Office Box 1269 Columbus, OH 43216	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.8 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address TekCollect 871 Park Street Columbus, OH 43215	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.8 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address U.S. Attorney General U.S. Department of Justice 950 Pennsylvania Ave. NW Washington, DC 20530-0001	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.16 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?

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Debtor 1 Natasha Ann Richardson		Case number (if known)			
UNC Health Care Information Serv. 1025 Think PL Morrisville, NC 27560-9002	Line 4.33 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims			
, , , , , , , , , , , , , , , , , , , ,	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?			
UNC Healthcare	Line 4.33 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
2025 Think Place Morrisville, NC 27560-9002		Part 2: Creditors with Nonpriority Unsecured Claims			
Morrisvine, NO 27300-3002	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?			
US Attorney's Office (ED)**	Line 4.16 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
150 Fayetteville Street Suite 2100		■ Part 2: Creditors with Nonpriority Unsecured Claims			
Raleigh, NC 27601-1461					
	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?			
Weddington Family Dentistry	Line 4.34 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims			
3099 Rock Hill Church Road Concord, NC 28027		Part 2: Creditors with Nonpriority Unsecured Claims			
3011001G, 110 20021	Last 4 digits of account number				

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 3,064.37
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 6,813.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 9,877.37
				Total Claim
Total	6f.	Student loans	6f.	\$ 40,234.72
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	60	\$ 0.00
	6h.	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6g. 6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 51,083.44
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 91,318.16

Fill in this inform						
Debtor 1						
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ban	kruptcy Court for the:	EASTERN DISTRICT O	F NORTH CAROLINA (NC			
Case number (if known)					_	Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Leonard Aluminum Utility Buildings 630 West Inependence Blvd. Suite 3 Mount Airy, NC 27030	Type: Service Contract Description: Storage Unit Terms: \$75.00 per Month (Month to Month) Beginning Date: 2021 Debtor's Interest: Lessee Debtor's Intention: Assume

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	information to identify your				
Debtor 1	Natasha Ann Ric	hardson Middle Name	Last Name		
Debtor 2	i list ivallie	Middle Name	Last Name		
(Spouse if, filing	g) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	EASTERN DISTRICT C EXEMPTIONS)	F NORTH CAROLINA	(NC	
Case numb (if known)	er				☐ Check if this is an amended filing
	Form 106H				
Sched	ule H: Your Cod	ebtors			12/15
■ No □ Yes 2. With Arizona	in the last 8 years, have you a, California, Idaho, Louisiana, Go to line 3. Did your spouse, former spor	ı lived in a community pr , Nevada, New Mexico, Pu	roperty state or territo lerto Rico, Texas, Wash	ry? (Community property	states and territories include
in line Form 1 out Co	2 again as a codebtor only i	f that person is a guaran Form 106E/F), or Sched	tor or cosigner. Make	sure you have listed the 06G). Use Schedule D, S	with you. List the person shown e creditor on Schedule D (Official chedule E/F, or Schedule G to fil
	amo, mambon, onoon, only, onato and <u>-</u>	6646		Crieck all scriedules	τιατ αρριγ.
3.1				☐ Schedule D, line	
٨	lame			☐ Schedule E/F, lin	
				☐ Schedule G, line	
	lumber Street				
C	City	State	ZIP Code		
				_	
3.2	lame			Schedule D, line	
IN	auno			☐ Schedule E/F, lin	e
				☐ Schedule G, line	
	lumber Street City	State	ZIP Code		
C	only .	Giale	ZIF Code		

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Fill	in this information to	o identify your ca	۶۵.				1				
	otor 1	Natasha Ann									
	otor 2 ouse, if filing)					_					
Uni	ted States Bankrup	tcy Court for the:	EASTERN DISTRICT EXEMPTIONS)	OF NORTH CAROL	INA (NC						
	se number						☐ An				
<u>O</u>	fficial Form	<u> 1061</u>					MN	// DD/ Y	YYY		
S	chedule I: `	Your Inco	ome								12/15
sup spo atta Pai	plying correct info use. If you are sep ch a separate shee t1: Describe	ormation. If you a parated and you et to this form. C e Employment	ible. If two married peo are married and not filin spouse is not filing wi On the top of any addition	ng jointly, and your th you, do not inclu	spouse i de infori	s liv nati	ring with y on about y	ou, incl your spo	ude inform ouse. If mo	ation abou re space is	ut your s needed,
1.	Fill in your emploinformation.	oyment		Debtor 1				Debtor 2	or non-fili	ng spous	е
	If you have more than one job, attach a separate page with		Employment status	■ Employed				☐ Employed			
	information about additional	1 - 3 -		☐ Not employed				☐ Not e	mployed		
	employers.		Occupation	Accounting							
	Include part-time, self-employed wo		Employer's name	McCarthy Build	er Supp	ly					
	Occupation may i or homemaker, if		Employer's address	1250 Kirkland R Suite 103 Raleigh, NC 276							
			How long employed the	nere? 2 Year	6 Month	าร		_			
Pai	t 2: Give Det	tails About Mon	thly Income								
	mate monthly incouse unless you are		te you file this form. If y	you have nothing to r	eport for	any	line, write	\$0 in the	space. Incl	ude your n	on-filing
	ou or your non-filing e space, attach a se		re than one employer, co	embine the informatio	n for all e	mpl	oyers for th	nat perso	on on the lin	es below. I	If you need
							For Debt	or 1	For Deb	tor 2 or ng spouse	
2.			y, and commissions (be alculate what the monthly		2.	\$	3,3	333.35	\$	N/A	<u> </u>
3.	Estimate and list	t monthly overti	me pay.		3.	+\$		0.00	+\$	N/A	<u>\</u>

Official Form 106I Schedule I: Your Income page 1

3,333.35

N/A

4. Calculate gross Income. Add line 2 + line 3.

Debt	or 1	Natasha Ann Richardson	-	С	ase	number (if known)				
					For	Debtor 1		ebtor iling s	2 or spouse	
	Cop	by line 4 here	4.		\$_	3,333.35	\$		N/A	<u>\</u>
5.	List	t all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a		\$	632.08	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		$\mathring{\$}^-$	0.00	\$		N/A	
	5c.	Voluntary contributions for retirement plans	5c.		\$ 	0.00	\$		N/A	
	5d.	Required repayments of retirement fund loans	5d		\$_	0.00	\$		N/A	_
	5e.	Insurance	5e		\$_	0.00	\$		N/A	\
	5f.	Domestic support obligations	5f.		\$	0.00	\$		N/A	<u> </u>
	5g.	Union dues	5g		\$	0.00	\$		N/A	<u>\</u>
	5h.	Other deductions. Specify:	5h	.+	\$_	0.00	+ \$		N/A	<u>\</u>
6.	Add	d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	,	₿	632.08	\$		N/A	<u>\</u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	,	₿_	2,701.27	\$		N/A	<u>\</u>
8.	List 8a.	profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a		\$_	0.00	\$		N/A	
	8b.	Interest and dividends	8b		\$_	0.00	\$		N/A	<u>\</u>
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$	0.00	\$		N/A	
	8d.	. , .	8d		\$	0.00	\$		N/A	_
	8e.	Social Security	8e		\$	0.00	\$		N/A	<u>\</u>
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	e 8f. 8g		\$_ \$	0.00	\$		N/A N/A	_
	8h.	Other monthly income. Specify: Contributions From Daughters	8h		$\overset{\mathtt{v}}{\$}-$	200.00	*		N/A	_
	011.	Oditilibations (10th Daughters		··	Ψ_	200.00	`		14/7	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	_	200.00	\$		N/	Α
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		2,901.27 + \$		N/A	= \$	2,901.27
		If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		-				1471	* -	
11.	Star Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not exify:	depe			•			e <i>J</i> . +\$	0.00
12.		d the amount in the last column of line 10 to the amount in line 11. The restet that amount on the Summary of Schedules and Statistical Summary of Certaillies						12.	\$	2,901.27
13.	Do	you expect an increase or decrease within the year after you file this form	?						Combi month	ined Ily income
		No.								

Official Form 106l Schedule I: Your Income page 2

Fill	in this informa	ation to identify yo	our case:			1		
	otor 1	Natasha Anr		Ison		Ch	neck if this is:	
		Natasila Aiii	TRIONAL	13011			An amended filing	•
	otor 2 ouse, if filing)							owing postpetition chapter of the following date:
Unit	ed States Bank	ruptcy Court for the		RN DISTRICT OF NORTH EMPTIONS)	CAROLINA		MM / DD / YYYY	
	e number nown)							
0	fficial Fo	rm 106J						
S	chedule	J: Your	Exper	nses				12/15
Be info	as complete ormation. If m	and accurate as	possible eded, atta	. If two married people are				
Par 1.		ribe Your House	hold					
١.	Is this a join							
			in a separ	ate household?				
	□ N □ Y	· -	st file Offici	al Form 106J-2, <i>Expen</i> ses	for Separate House	ehold of De	ebtor 2.	
2.	Do you hav	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.						_
								□ No
								_ □ Yes □ No
								☐ Yes
								_
								☐ Yes
3.	expenses of	penses include of people other t d your depende	han $_{m au}$	No Yes				_
Par		ate Your Ongoi						
exp		a date after the		uptcy filing date unless y y is filed. If this is a supp				hapter 13 case to report of the form and fill in the
the		h assistance an		government assistance if cluded it on Schedule I: Y			Your ex	penses
•		·				_		
4.		or home owners and any rent for th		ses for your residence. In or lot.	nclude first mortgage	e 4.	\$	500.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a.	\$	0.00
		erty, homeowner's	s, or renter	's insurance		4b.	·	0.00
			•	upkeep expenses		4c.		0.00
	4d. Home	owner's associat	tion or con	dominium dues		4d.	\$	0.00

0.00

Additional mortgage payments for your residence, such as home equity loans

Natasha Ann Richardson		Case number (if known)			
es:					
	6a.	\$	140.27		
e de la companya de	6b.	\$	55.00		
		·	0.00		
·			100.00		
		·	400.00		
		·			
		·	0.00 92.00		
		· .			
•		·	45.00		
•	11.		300.00		
	12.	\$	400.00		
1 /		·	96.00		
		·			
<u> </u>	14.	Φ	80.00		
	15a	\$	0.00		
		·	0.00		
		· -	160.00		
		·			
	150.	φ	0.00		
	16	¢	25.00		
		Ψ	25.00		
	175	\$	0.00		
		·	0.00		
		·			
			0.00		
· · ·		Description	0.00		
		\$	0.00		
		· .	0.00		
	10	<u> </u>	<u> </u>		
·		ur Income			
			0.00		
		·	0.00		
		·	0.00		
• •		· .			
		·	0.00		
		·	0.00		
: Specify: Emergencies/Miscellaneous	21.	+\$	100.00		
late your monthly expenses					
Add lines 4 through 21.		\$	2,493.27		
3		\$			
		·	2,493.27		
ida iino 22a ana 22b. Tho robuit ib your monting expenses.		Ψ	2,493.21		
late your monthly net income.	'				
Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,901.27		
Copy your monthly expenses from line 22c above.	23b.	-\$	2,493.27		
Subtract your monthly expenses from your monthly income.		c	400 00		
The result is your <i>monthly net income</i> .	23c.	Ъ	408.00		
	£!! - 4!-!	f0			
			or decrease because of a		
cation to the terms of your mortgage?	ui mongaye p	aymon to morease	or accrease pecause of a		
Cipsintten Sfl Post	Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: Cell Phone and housekeeping supplies care and children's education costs ing, laundry, and dry cleaning inal care products and services al and dental expenses portation. Include gas, maintenance, bus or train fare. tinclude care payments. tainment, clubs, recreation, newspapers, magazines, and books table contributions and religious donations ance. tinclude insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Other insurance. Specify: . Do not include taxes deducted from your pay or included in lines 4 or 20. y: Personal Property Taxes Iment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Other. Specify: Other. Specify: Other. Specify: other specify: payments of alimony, maintenance, and support that you did not report a ted from your pay on line 5, Schedule 1, Your Income (Official Form 1061), payments you make to support others who do not live with you. y: real property expenses not included in lines 4 or 5 of this form or on Sch Mortgages on other property Real estate taxes Property, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses Homeowner's association or condominium dues : Specify: Emergencies/Miscellaneous late your monthly expenses did lines 22 (monthly expenses did lines 24 through 21. Copy line 12 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 did line 22a and 22b. The result is your monthly expenses. late your monthly expenses for line 22c above. Subtract your monthly expenses from line 22c above. Subtract your monthly expenses from line 22c above. Subtract your monthly expenses from your expenses within the year of o you expect to linish paying for your car loan within the year of o you expect you ample, do you expect to linish paying for your car loan within the year of o you expect you	Electricity, heat, natural gas Water, sewer, garbage collection Felephone, cell phone, Internet, satellite, and cable services Cother. Specify: Cell Phone and housekeeping supplies care and children's education costs Ing, laundry, and dry cleaning Inal care products and services Ing, laundry, and dry cleaning Inal care products and services Ing, laundry, and dry cleaning Inal care products and services Ing, laundry, and dry cleaning Inal care products and services Ing, laundry, and dry cleaning Inal care products and services Ing, laundry, and dry cleaning Inal care products and services India and dental expenses India and dental expenses Include car payments. Include car payments Include insurance deducted from your pay or included in lines 4 or 20. It is insurance Include insurance deducted from your pay or included in lines 4 or 20. It is insurance Include insurance specify: In Don on include taxes deducted from your pay or included in lines 4 or 20. It is insurance. Specify: In Don on include taxes deducted from your pay or included in lines 4 or 20. It is insurance. Specify: Include taxes deducted from your pay or included in lines 4 or 20. It is insurance. Specify: Include taxes deducted from your pay or included in lines 4 or 20. It is insurance. Specify: Include taxes deducted from your pay or included in lines 4 or 20. It is insurance in lines in the insurance in laundry in the insurance in lines	Electricity, heat, natural gas Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services 6c. \$ Other. Specify: Cell Phone 6d. \$ and housekeeping supplies 7. \$ care and children's education costs 8n, laundry, and dry cleaning 91. \$ san la care products and services 10. \$ and larde products and services 11. \$ portation. Include gas, maintenance, bus or train fare. 11. \$ 12. \$ 13. \$ 14. \$ 15. \$ 16. \$ 17. \$ 18. \$ 18. \$ 19. \$ 19. \$ 10. \$ 11. \$ 11. \$ 12. \$ 13. \$ 14. \$ 14. \$ 15. \$ 16. \$ 17. \$ 17. \$ 18. \$ 19. \$ 19. \$ 10. \$ 10. \$ 11. \$ 11. \$ 12. \$ 13. \$ 14. \$ 14. \$ 15. \$ 16. \$ 17. \$ 17. \$ 18. \$ 19. \$ 19. \$ 19. \$ 19. \$ 19. \$ 10. \$ 10. \$ 11. \$ 11. \$ 12. \$ 13. \$ 14. \$ 14. \$ 15. \$ 16. \$ 17. \$ 17. \$ 18. \$ 19. \$		

Fill	in this inform	nation to identify your	case:			
Deb	tor 1	Natasha Ann Ricl	hardson			
Date	O	First Name	Middle Name	Last Name		
1	otor 2 use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Bar	nkruptcy Court for the:	EASTERN DISTRICT C EXEMPTIONS)	OF NORTH CAROLINA (NC		
Cas	e number					
(if kno	own)				_	ck if this is an nded filing
		<u>m 106Sum</u>	111-1199	. I O and a land of the land of the control of		
				nd Certain Statistical Information are filing together, both are equally responsible f	or supplyi	12/15
infor your	mation. Fill o original form	out all of your schedulens, you must fill out a	es first; then complete th	he information on this form. If you are filing amend the box at the top of this page.		
Part	Summa	arize Your Assets				
						assets of what you own
1.		/B: Property (Official Fo e 55, Total real estate, for			\$	0.00
	1b. Copy line	e 62, Total personal pro	perty, from Schedule A/B.		\$	19,905.00
	1c. Copy line	e 63, Total of all propert	y on Schedule A/B		\$	19,905.00
Part	2: Summa	arize Your Liabilities				
						l iabilities nt you owe
2.			laims Secured by Property mn A, Amount of claim, at	(Official Form 106D) the bottom of the last page of Part 1 of <i>Schedule D</i>	\$	13,566.64
3.			Unsecured Claims (Official 1 (priority unsecured claim	ll Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>	\$	9,877.37
	3b. Copy the	e total claims from Part	2 (nonpriority unsecured c	elaims) from line 6j of Schedule E/F	\$	91,318.16
				Your total liabilities	\$	114,762.17
Part	3: Summa	arize Your Income and	Expenses			
4.	Schedule I: Y	Your Income (Official Fo	orm 106I) e from line 12 of <i>Schedule</i>	÷ 1	\$	2,901.27
5.		Your Expenses (Official onthly expenses from li			\$	2,493.27
Part	4: Answe	r These Questions for	Administrative and Stat	istical Records		
6.	-		er Chapters 7, 11, or 13? on this part of the form. C	heck this box and submit this form to the court with yo	our other so	chedules.
	■ Yes					
7.		f debt do you have?				
				debts are those "incurred by an individual primarily for one statistical purposes. 28 U.S.C. § 159.	r a persona	l, family, or

☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Natasha Ann Richardson

Case number (if known)

the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____6,003.06

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cl	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	3,064.37
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	40,234.72
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	43,299.09

Fill in this inform	mation to identify your	case:			
Debtor 1	Natasha Ann Ric	hardson			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C EXEMPTIONS)	OF NORTH CAROLINA (NO	C	
Case number					
(if known)					Check if this is an amended filing
You must file this obtaining money	s form whenever you fi	le bankruptcy schedules		Making a false state	ement, concealing property, or 00, or imprisonment for up to 20
Sign	n Below				
Did you pa	y or agree to pay some	one who is NOT an attor	ney to help you fill out ba	ankruptcy forms?	
■ No					
☐ Yes. N	Name of person				kruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
	lity of perjury, I declare e true and correct.	that I have read the sum	mary and schedules filed	d with this declaration	on and
X /c/ Nat	asha Ann Richardso	n	Х		
Natash	na Ann Richardson re of Debtor 1	<u></u>	Signature of I	Debtor 2	
Date	November 8, 2021		Date		

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of North Carolina (NC Exemptions)

In r	e Natasha Ann Richardson	Case No.	
	Debtor(s)	Chapter	13
	DISCLOSURE OF COMPENSATION OF ATTORNE	Y FOR DE	CBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney fo compensation paid to me within one year before the filing of the petition in bankruptcy, or ag be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankrupt	reed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept	\$	6,450.00
	Prior to the filing of this statement I have received	\$	0.00
	Balance Due	\$	6,450.00
2.	\$313.00 of the filing fee has been paid.		
3.	The source of the compensation paid to me was:		
	■ Debtor □ Other (specify):		
4.	The source of compensation to be paid to me is:		
	■ Debtor □ Other (specify):		
5.	■ I have not agreed to share the above-disclosed compensation with any other person unles	s they are memb	pers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with a person or persons who are copy of the agreement, together with a list of the names of the people sharing in the comp		
6.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the	ne bankruptcy c	ase, including:
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determin b. Preparation and filing of any petition, schedules, statement of affairs and plan which may c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any d. [Other provisions as needed] Exemption planning, Means Test planning, and other items if specifical or required by Bankruptcy Court local rule. May include fee paid to outs meeting. 	be required; adjourned hear in adjourned in the contract of	rings thereof;
7.	By agreement with the debtor(s), the above-disclosed fee does not include the following serving Representation of the debtors in any dischargeability actions, relief from proceeding, and any other items excluded in attorney/client fee contractive.	m stay action	

Fee also collected, where applicable, include such things as: Pacer access: \$10 per case, Credit Reports: \$10 each, Judgment Search: \$10 each, Credit Counseling Certification: Usually \$15 per client, Financial Management Class Certification: Usually \$15 per client, Use of computers for Credit Counseling briefing or Financial Managment Class: \$10 per session, or paralegal typing assistance regarding credit counseling briefing: \$75 per session.

In re	Natasha Ann Richardson	Case No.		
	Debtor(s)			

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)				
	CERTIFICATION			
I certify that the foregoing is a complete statement of this bankruptcy proceeding.	f any agreement or arrangement for payment to me for representation of the debtor(s) in			
November 8, 2021 Date	Is/ Jason Watson for LOJTO Jason Watson for LOJTO 32986 Signature of Attorney The Law Offices of John T. Orcutt, PC 6616-203 Six Forks Road Raleigh, NC 27615 (919) 847-9750 Fax: (919) 847-3439 postlegal@johnorcutt.com Name of law firm			

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter	7:	Liquidation	
\$	245	filing fee	
	\$78	administrative fee	
<u>+</u>	\$15	trustee surcharge	
\$	338	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Fill in this inform	ill in this information to identify your case:							
Debtor 1	Natasha Ann Richar	dson						
Debtor 2 (Spouse, if filing)								
United States B	Sankruptcy Court for the:	Eastern District of North Carolina (NC Exemptions)						
Case number (if known)								

Check as directed in lines 17 and 21: According to the calculations required by this									
According to the calculations required by this Statement:									
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).								
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).								
	3. The commitment period is 3 years.								
	4. The commitment period is 5 years.								

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

04/20

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Par	11: Calculate Your Average Monthly Income							
1.	What is your marital and filing status? Check one of	nly.						
	■ Not married. Fill out Column A, lines 2-11.							
	☐ Married. Fill out both Columns A and B, lines 2-11.							
F	ill in the average monthly income that you received from al	l sources	. derived	l durina the 6 full	months	before you file	e this bankruptcy case. 1	1 U.S.C. §
10 th	01(10A). For example, if you are filing on September 15, the 6-rie 6 months, add the income for all 6 months and divide the total bouses own the same rental property, put the income from that	month peri al by 6. Fill	iod would I in the re	be March 1 throusult. Do not includ	igh Augus le any inc	st 31. If the amo	ount of your monthly incom ore than once. For examp	e varied during le, if both
					Column Debtor		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and coı	mmissi	ons (before all	\$	5,803.06	\$	
3.	Alimony and maintenance payments. Do not include Column B is filled in.	e paymer	nts from	a spouse if	\$	0.00	\$	
4.	All amounts from any source which are regularly p of you or your dependents, including child suppor from an unmarried partner, members of your househol and roommates. Do not include payments from a spou you listed on line 3.	t. Include ld, your d	e regula depende	r contributions ents, parents,	\$	200.00	\$	
5.	Net income from operating a business, profession, or farm	Debtor	1					
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	-\$	0.00					
	Net monthly income from a business, profession, or fa	rm \$	0.00	Copy here ->	\$	0.00	\$	
6.	Net income from rental and other real property	Debtor	1					
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	-\$	0.00					
	Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$	0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

ebtor 1	Natasha Ann Richardson			Case numbe	er (<i>if knowi</i>	1)			
				Column A Debtor 1		Column B Debtor 2 o	or		
7. Inte	erest, dividends, and royalties			\$	0.00	\$			
8. Un	employment compensation			\$	0.00	\$			
	not enter the amount if you contend that the amount Social Security Act. Instead, list it here:	nt received was a benefit	under						
ı	For you	\$ 0.00)						
ı	For your spouse	\$							
9. Per ber not Un dis pay doe	nsion or retirement income. Do not include any a nefit under the Social Security Act. Also, except as t include any compensation, pension, pay, annuity, ited States Government in connection with a disability, or death of a member of the uniformed servicy paid under chapter 61 of title 10, then include that es not exceed the amount of retired pay to which yoetired under any provision of title 10 other than chapter 61 of title 10 other than chapter 61 or the service of	stated in the next sentence or allowance paid by the lity, combat-related injury ices. If you received any repay only to the extent the bu would otherwise be entered.	e, do or etired at it	\$	0.00)			
10. Inc Do und cor crir cor Go dea	come from all other sources not listed above. Span not include any benefits received under the Social der the Federal law relating to the national emerger der the National Emergencies Act (50 U.S.C. 1601 conavirus disease 2019 (COVID-19); payments receive, a crime against humanity, or international or dompensation, pension, pay, annuity, or allowance payvernment in connection with a disability, combat-relating to a member of the uniformed services. If necestal page and put the total below.	secify the source and amo Security Act; payments m noy declared by the Presidet seq.) with respect to the eived as a victim of a war mestic terrorism; or id by the United States lated injury or disability, o	nade dent e						
				\$	0.00	\$			
				\$	0.00	-			
	Total amounts from separate pages, if any.		- +	\$	0.00			•	
	Iculate your total average monthly income. Add ch column. Then add the total for Column A to the total for Column Determine How to Measure Your Deductions	otal for Column B.	\$	6,003.06	+ \$			6,003.	•
ail Z.	Determine now to measure Your Deductions	s irom income							
13. Ca ■	py your total average monthly income from line lculate the marital adjustment. Check one: You are not married. Fill in 0 below.						\$	6,003.	.06_
	You are married and your spouse is filing with yo								
	You are married and your spouse is not filing with Fill in the amount of the income listed in line 11, 0 dependents, such as payment of the spouse's tax	Column B, that was NOT							
	Below, specify the basis for excluding this income adjustments on a separate page.	e and the amount of incor	ne de	oted to each	h purpo:	se. If necessary	y, list add	itional	
	If this adjustment does not apply, enter 0 below.		¢.						
			ф —						
			Ψ		_				
		1	- \$						
	Total		\$	0.0	0	Copy here=>			0.00
14. Y	our current monthly income. Subtract line 13 from	m line 12.					\$	6,003	.06
15. C	alculate your current monthly income for the ye	ar. Follow these steps:							
	5a Copy line 14 here=>	·					\$	6,003.	.06

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Debtor 1	Natasha Ann Richardson	Case number (if known)	_
	Multiply line 15a by 12 (the number of months in a year).	x 12	_
15	o. The result is your current monthly income for the year for this pa	rt of the form	

Case number (if known)

16	. Calc	ulate	the median family income that applies to yo	u. Follow the	se steps:		
	16a.	Fill in	the state in which you live.	NC			
	16b.	Fill in	the number of people in your household.	1			
	16c.	Fill in	the median family income for your state and siz	ze of househo	old.	\$	51,278.00
			nd a list of applicable median income amounts, outions for this form. This list may also be availa		ng the link specified in the separate	* _	
17	. How	do tl	he lines compare?				
	17a.		Line 15b is less than or equal to line 16c. On 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NO		• • •		
	17b.	-	Line 15b is more than line 16c. On the top of 1325(b)(3). Go to Part 3 and fill out Calcula your current monthly income from line 14 abo	tion of You	the state of the s		•
Par	t 3:	Ca	Iculate Your Commitment Period Under 11 U.	S.C. § 1325	(b)(4)		
18.	Copy	y you	r total average monthly income from line 11	•		\$	6,003.06
19.	conte	end th	ne marital adjustment if it applies. If you are mat calculating the commitment period under 11 ncome, copy the amount from line 13.				
	19a.	If the	marital adjustment does not apply, fill in 0 on lir	ne 19a.		- \$	0.00
	19b.	Subt	ract line 19a from line 18.			\$	6,003.06
20.	Calc	ulate	your current monthly income for the year. F	follow these	steps:		
	20a.	Сору	v line 19b			\$_	6,003.06
		Multi	ply by 12 (the number of months in a year).				C 12
	20b.	The r	result is your current monthly income for the yea	ır for this parı	of the form	\$_	72,036.72
	20c.	Сору	the median family income for your state and size	ze of househ	old from line 16c	\$_	51,278.00
	21.	How	do the lines compare?				
			Line 20b is less than line 20c. Unless otherwise period is 3 years. Go to Part 4.	ordered by t	he court, on the top of page 1 of this form, c	heck box 3,	The commitment
			Line 20b is more than or equal to line 20c. Unle	ss otherwise	ordered by the court, on the top of page 1 o	of this form, c	heck box 4, The

Natasha Ann Richardson

Debtor 1

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Debtor 1	Natasha Ann Richardson	Case number (if known)	
Part 4:	Sign Below		
Ву	signing here, under penalty of perjury I declare that the information of	on this statement and in any attachment	s is true and correct.
χ /s	/ Natasha Ann Richardson		
	atasha Ann Richardson		

MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

Date November 8, 2021

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

			•	
Fill in Debtor	this information to identify your c			
Debtor				
United		Eastern District of North Carolina (NC Exemptions)		
Case r (if know	number wn)		☐ Check if th	is is an amended filing
	Form 122C-2 pter 13 Calculation	of Your Disposable I	ncome	04/19
	out this form, you will need your co timent Period (Official Form 122C-	ompleted copy of <i>Chapter 13 Stateme</i> 1).	ent of Your Current Monthly Inco	me and Calculation of
space i		e. If two married people are filing togo to this form, Include the line number ase number (if known).		
Part 1	Calculate Your Deductions fr	rom Your Income		
the		sues National and Local Standards for e IRS standards, go online using the he bankruptcy clerk's office.		
exp	enses if they are higher than the star	lines 6-15 regardless of your actual expondards. Do not include any operating ex s that you subtracted from your spouse's	penses that you subtracted from in	come in lines 5 and 6 of Form
If yo	ur expenses differ from month to mo	onth, enter the average expense.		
Note	e: Line numbers 1-4 are not used in t	this form. These numbers apply to inform	mation required by a similar form us	sed in chapter 7 cases.
5.	The number of people used in de	etermining your deductions from inco	ome	
		uld be claimed as exemptions on your followed the lependents whom you support. This nune shold.		1
Nati	onal Standards You must	use the IRS National Standards to answer	wer the questions in lines 6-7.	
6.	Food, clothing, and other items: Standards, fill in the dollar amount f	Using the number of people you entered for food, clothing, and other items.	d in line 5 and the IRS National	\$
7.	the dollar amount for out-of-pocket people who are 65 or olderbecause	nce: Using the number of people you en health care. The number of people is space older people have a higher IRS allow have deduct the additional amount on line.	olit into two categoriespeople who ance for health car costs. If your ac	are under 65 and

Official Form 122C-2

ebtor 1	Natasha Ann Richardson		Case number (if known)
Peopl	le who are under 65 years of age		
7	'a. Out-of-pocket health care allowance per person	\$ 68	
7	b. Number of people who are under 65	X 1	
7	C. Subtotal. Multiply line 7a by line 7b.	\$ 68.00	Copy here=> \$ 68.00
_			
Peopl	le who are 65 years of age or older		
7	d. Out-of-pocket health care allowance per person	\$142	
7	e. Number of people who are 65 or older	X0	
7	f. Subtotal. Multiply line 7d by line 7e.	\$	Copy here=> \$ 0.00
7	g. Total. Add line 7c and line 7f	\$	68.00 Copy total here=> \$ 68.00
·	g. 10-11-7 (10 m) 0 m) 0 m) 1 m) 1 m) 1 m) 1 m) 1 m)		
Local	Standards You must use the IRS Local Standards	to answer the questions in	lines 8-15.
Based	d on information from the IRS, the U.S. Trustee Pro		
_	ruptcy purposes into two parts:		
_	using and utilities - Insurance and operating expe	nses	
■ Ho	using and utilities - Mortgage or rent expenses		
separ 8. H	ate instructions for this form. This chart may also Housing and utilities - Insurance and operating expenses the dollar amount listed for your county for insurance	be available at the bankr benses: Using the number	
9. F	lousing and utilities - Mortgage or rent expenses:		
9	Pa. Using the number of people you entered in line 5, listed for your county for mortgage or rent expens		\$853.00
g	b. Total average monthly payment for all mortgages	and other debts secured b	y your home.
	To calculate the total average monthly payment, a contractually due to each secured creditor in the for bankruptcy. Next divide by 60.		
	Name of the creditor	Average monthly payment	
	-NONE-	\$	
	9b. Total average monthly payme	ent \$	Copy here=> -\$ Repeat this amoun on line 33a.
9	9c. Net mortgage or rent expense.		
	Subtract line 9b (total average monthly payment) or rent expense). If this number is less than \$0, each of the subtract line 9b (total average monthly payment) or rent expense.		\$853.00 Copy here=> \$853.00
10 4	f you claim that the H.S. Trustee Brearem's division	n of the IDS I seel Stand	ard for housing is incorrect and
	f you claim that the U.S. Trustee Program's divisio Iffects the calculation of your monthly expenses, f		
	Explain why:		

Case number (if known)

11.	Local tr	ansportation expenses: (Check the number of vehic	les for whic	h you claim a	an ownershi	p or operating	g expense.	
	□ 0. Go	to line 14.							
	■ 1. Go	to line 12.							
	□ 2 or r	nore. Go to line 12.							
12.		operation expense: Using g expenses, fill in the Operation							224.00
13.	You may	ownership or lease expended not claim the expense if your two vehicles.							
Ve	hicle 1	Describe Vehicle 1: 20)15 Hyundai Elantra 1 olicy # xxxxx xx18-32	50,000 mi	les GEICO	Auto Insu	ırance:		
13a	Ownersh	nip or leasing costs using IF	RS Local Standard			\$	533.00		
13b.	•	monthly payment for all denclude costs for leased veh	•						
	are cont	late the average monthly practually due to each secur tcy. Then divide by 60.				t			
	Na	me of each creditor for Ve	ehicle 1	Average i	monthly				
	Ex	eter Finance Corporati	on**	\$	253.52				
		Total Ave	rage Monthly Payment	\$	253.52	Copy here =>	-\$ 25 ;	Repeat this amount on line 33b.	
13c.		icle 1 ownership or lease e. line 13b from line 13a. if th	•	enter \$0.		\$	279.48	Copy net Vehicle 1 expense here => \$	279.48
Ve	hicle 2	Describe Vehicle 2:							
13d	Ownersh	nip or leasing costs using IF					0.00		
13e.	Average leased v	monthly payment for all de ehicles.	ebts secured by Vehicle 2.	Do not incl	ude costs for	•			
	Na	me of each creditor for Ve	ehicle 2	Average i					
				\$					
		Total ave	rage monthly payment	\$		Copy here => -\$ _	0.0	Repeat this amount on line 33c.	
13f.		icle 2 ownership or lease e. line 13e from line 13d. if th	•	enter \$0.		\$	0.00	Copy net Vehicle 2 expense here => \$	0.00
14.		ransportation expense: If <i>Fransportation</i> expense a						n the	0.00
15.	also ded	nal public transportation out a public transportation or more than the IRS Local S	expense, you may fill in w	hat you beli					0.00

Natasha Ann Richardson

Debtor 1

Case number (if known)

Oth	or Naccasany Evnances		al a al at: a ::	!:			
Oth	er Necessary Expenses	the following IRS categori		ns listed above	, you are allowed your monthly expens	es for	
16.	self-employment taxes, so	cial security taxes, and Med lowever, if you expect to red	licare taxe ceive a tax	es. You may inc c refund, you m	d local taxes, such as income taxes, clude the monthly amount withheld fror ust divide the expected refund by 12 for taxes.	n	
	Do not include real estate,	•		. ,		\$	632.08
17.	Involuntary deductions: contributions, union dues,		ductions t	hat your job re	quires, such as retirement	•	0.00
	Do not include amounts that	at are not required by your	ob, such a	as voluntary 40	1(k) contributions or payroll savings.	\$	0.00
18.	filing together, include payr	ments that you make for yo or life insurance on your de	ur spouse	's term life insu	e insurance. If two married people are rance. spouse's life insurance, or for any for	m \$	0.00
19.	Court-ordered payments:	: The total monthly amount	that you p	ay as required	by the order of a court or		
	administrative agency, suc Do not include payments o				You will list these obligations in line 35	. \$	0.00
20.	Education: The total mont		education	n that is either i	required:		
	as a condition for your j	ob, or					
	for your physically or me	entally challenged depende	nt child if	no public educ	ation is available for similar services.	\$	0.00
21.		nly amount that you pay for or any elementary or secon		-	sitting, daycare, nursery, and preschoo	sl. \$	0.00
22.					amount that you pay for health care		
	by a health savings accour Payments for health insura	nt. Include only the amount	that is mo	re than the tota		\$	0.00
23.	•	· ·			you pay for telecommunication service	 s	
_0.	for you and your dependen	nts, such as pagers, call wa nt necessary for your health	iting, calle	r identification,	special long distance, or business cel our dependents or for the production of		
					rvice. Do not include self-employment	+\$	0.00
	expenses, such as those re	eported on line 5 of Official	F0fm 122	C-1, or any am	ount you previously deducted.		
24.	Add all of the expenses a Add lines 6 through 23.	allowed under the IRS exp	ense allo	wances.		\$	3,263.56
Add	itional Expense Deduction	ns These are additional Note: Do not include					
25.					ses. The monthly expenses for health ly necessary for yourself, your spouse		
	Health insurance		\$	0.00			
	Disability insurance		\$	0.00			
	Health savings account		+ \$	0.00	_		
	Total		\$	0.00	Copy total here=>	\$	0.00
	De you getuelly enend this	total amount?					
	Do you actually spend this No. How much do	you actually spend?					
	Yes	you dotadily opona.	\$				
26.	Continued contributions continue to pay for the reas	sonable and necessary care	e and supp	port of an elder	e actual monthly expenses that you wil ly, chronically ill, or disabled member uch expenses. These expenses may		
	include contributions to an	account of a qualified ABLE	program	. 26 U.S.C. § 5	29A(b)	\$	0.00
27.	safety of you and your fam	ily under the Family Violend	e Preven	tion and Servic	nses that you incur to maintain the es Act or other federal laws that apply		0.00
	By law, the court must kee	p tne nature of these expen	ses confid	aential.		\$	0.00

Natasha Ann Richardson

Debtor 1

ebtor 1	Natasha Ann Richardson	Case number (if know	m)			
	Additional home energy costs. Your hom line 8.	ne energy costs are included in your insurance and operatir	g expense	es on		
	If you believe that you have home energy of 8, then fill in the excess amount of home en	costs that are more than the home energy costs included in nergy costs	expenses	on line		
	You must give your case trustee document amount claimed is reasonable and necessary	ation of your actual expenses, and you must show that the ary.	additional		\$	0.0
	Education expenses for dependent child \$170.83* per child) that you pay for your depublic elementary or secondary school.	dren who are younger than 18. The monthly expenses (no ependent children who are younger than 18 years old to atte	ot more that end a priva	an ate or		
	You must give your case trustee document claimed is reasonable and necessary and r	ation of your actual expenses, and you must explain why the already accounted for in lines 6-23.	e amount			
	* Subject to adjustment on 4/01/22, and ev	ery 3 years after that for cases begun on or after the date o	f adjustme	nt.	\$	0.00
		the monthly amount by which your actual food and clothing gallowances in the IRS National Standards. That amount case in the IRS National Standards.				
		ional allowance, go online using the link specified in the se so be available at the bankruptcy clerk's office.	parate			
	You must show that the additional amount	claimed is reasonable and necessary.			\$	0.00
	Continuing charitable contributions. The instruments to a religious or charitable organization.	e amount that you will continue to contribute in the form of canization. 11 U.S.C. § 548(d)(3) and (4).	ash or fina	ancial		
	Do not include any amount more than 15%	of your gross monthly income.			\$	0.00
	Add all of the additional expense deduc Add lines 25 through 31.	tions.			\$	0.00
Dedu	uctions for Debt Payment			_		
lo	pans, and other secured debt, fill in lines	_				
	o calculate the total average monthly paymereditor in the 60 months after you file for ba	ent, add all amounts that are contractually due to each sec nkruptcy. Then divide by 60.	ured			
	Mortgages on your home				verage aymen	monthly t
33a.	Copy line 9b here			=> \$	-	0.00
	Loans on your first two vehicles					
33b.	Copy line 13b here			=> \$		253.52
33c.				=> \$		12.87
33d.	List other secured debts:					
	e of each creditor for other secured debt	ir	oes paym clude taxe r insuranc	es		
			No			
	Conn's Credit Corp	Household Items	☐ Yes	\$		5.59
	<u> </u>		_	Ψ		
			□ No	_		
			☐ Yes	\$		
		ו	□ No			
		[☐ Yes	+\$		
				1		

Debtor 1	Nata	sha Ann Richardson			Cas	se nu	ımber (<i>if known</i>)			
		debts that you listed in line property necessary for you				€,				
	No.	Go to line 35.								
	Yes.	State any amount that you listed in line 33, to keep po Next, divide by 60 and fill in	ssession of your proper							
Nam	e of the	creditor	Identify property that s	ecures the del	bt	То	tal cure amount		Monthly c	ure
-NC	NE-				\$	_		÷ 60 = \$		
					Total	\$	0.00	Copy total here:	Φ.	0.00
35. D	o vou o	owe any priority claims - su	ıch as a priority tax. cl	nild support.	or alimony - th	 nat				
	•	due as of the filing date of		• • •	•					
	No.	Go to line 36.								
	Yes.	Fill in the total amount of al ongoing priority claims, suc	• •		de current or					
		Total amount of all past-d	ue priority claims			\$	9,877.37	÷ 60	\$	164.62
36. P	rojecte	d monthly Chapter 13 plan	payment			\$	408.00	_		
O th To	office of ne Exec o find a l	multiplier for your district as s the United States Courts (for utive Office for United States ist of district multipliers that inclu nstructions for this form. This list	r districts in Alabama and Trustees (for all other of des your district, go online	nd North Caro districts). using the link s	lina) or by pecified in the	X .	7.00			
A	verage	monthly administrative expe	nse				\$28.56	Copy to here=>		28.56
		of the deductions for debtes 33e through 36.	payment.						\$	465.16
Total	Deduc	tions from Income								
38. A	dd all d	of the allowed deductions.								
		ne 24, All of the expenses all e allowances	owed under IRS	\$	3,263.56	6				
(Copy lir	ne 32, All of the additional ex			0.00)_				
(Copy lir	ne 37, All of the deductions for	or debt payment	+\$	465.16	<u> </u>	_			
	Total de	eductions		\$	3,728.72	<u> </u>	Copy total here=		\$	3,728.72
	i otal ut	Jacon 10	•••••	ΙΨ	-,	_	Copy total liefe=	-	Ψ	-,

ebtor 1	Natasha Ann Richardson						Case number (if known)					
Part 2:	Deterr	mine You	r Disposable Income Under 11 U.S.C. § 132	5(b)(2)							
			ent monthly income from line 14 of Form 12 urrent Monthly Income and Calculation of 0							\$_	6	,003.06
ch di: re	hildren. The sability pay sceived in a	ne monthly yments for accordance	y necessary income you receive for suppor y average of any child support payments, foster or a dependent child, reported in Part I of Form we with applicable nonbankruptcy law to the extended for such child.	er c 12	are p 2C-1,	ayments that you	s, or	\$	0	0.00		
er in	mployer wi 11 U.S.C.	thheld froi § 541(b)(tirement deductions. The monthly total of all m wages as contributions for qualified retireme 7) plus all required repayments of loans from r § 362(b)(19).	ent	plans	s, as spe	cified	\$	0	0.00		
42. T c	otal of all	deduction	ns allowed under 11 U.S.C. § 707(b)(2)(A). C	op	y line	38 here	=>	\$	3,728	3.72		
ex th	kpenses ar eir expens	nd you hav es. You m	al circumstances. If special circumstances just we no reasonable alternative, describe the spen nust give your case trustee a detailed explanation cumentation for the expenses.	cia	l circu	umstanc	es and Il					
Describe the special circumstances				Am	nount of	expen	se					
	Lannin	g Decre	ase		\$:	2,469.	71				
					\$							
					\$							
			Г	_	<u> </u>							
			Total	\$_		2,469	.71	Cop		2,469	0.71	
44. T o	otal adjus	tments. A	dd lines 40 through 43.			=	> \$		6,198.43	Copy		,198.43
45. C a	alculate y	our mont	hly disposable income under § 1325(b)(2).	Sul	btract	line 44 f	rom lin	e 39	Э.	5	-1	95.37
Part 3:	Chang	ge in Inco	me or Expenses									
ha tin yo	ave change me your ca ou filed you	ed or are verse will be a petition,	r expenses. If the income in Form 122C-1 or to virtually certain to change after the date you fill open, fill in the information below. For example check 122C-1 in the first column, enter line 2 in when the increase occurred, and fill in the arm	ed le, i in	your if the the se	bankrupt wages re econd co	tcy peti eported olumn, e	tion inc	and during the reased after			
Form	Liı	ne	Reason for change			Date of ch	nange		Increase or decrease?	Am	ount of change	
☐ 122									☐ Increase			
122		43a	No longer working part time job.			09/20	J21	_	■ Decrease	\$	2,469.71	
☐ 122 ☐ 402									☐ Increase	æ		
☐ 122 ☐ 122								_	☐ Decrease ☐ Increase	\$		
☐ 122									☐ Decrease	\$		
								-	☐ Increase	₹ .		
☐ 122									Decrease	\$		
			-							•		

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Debtor 1	Natasha Ann Richardson	Case number (if known)					
Part 4:	Sign Below						
rait 4.	Sign below						
X __	By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct. X /s/ Natasha Ann Richardson						
	Natasha Ann Richardson Signature of Debtor 1						
	MM / DD / YYYY						

Employment Security Commission Absolute Collection Service Concord Utility Department Attn: Benefit Payment Control 35 Cabarrus Avenue West 421 Fayetteville Street Mall Suite 600 Post Office Box 26504 Concord, NC 28025 Raleigh, NC 27611-6504 Raleigh, NC 27601 NC Child Support Absolute Collections Service Conn's Credit Corp Centralized Collections 421 Fayetteville Street Mall Attn: Officer Post Office Box 900006 Post Office Box 2358 Suite 600 Raleigh, NC 27601 Raleigh, NC 27675-9006 Beaumont, TX 77704 Equifax Information Systems LLC American Credit Duke Progress Energy Post Office Box 1771 P.O. Box 740241 P.O. Box 204531 Raleigh, NC 27602 Atlanta, GA 30374-0241 Dallas, TX 75320 Experian American Credit Acceptance Exeter Finance Corporation** P.O. Box 2002 ATTN: OFFICER Attn:Officer Post Office Box 166097 Allen, TX 75013-2002 340 East Main Street, Suite 400 Spartanburg, SC 29302 Irving, TX 75016 Trans Union Corporation Federal Loan Servicing American Credit Acceptance, LLC Attn: Officer/Bankruptcy Department P.O. Box 2000 P.O. Box 60610 Crum Lynne, PA 19022-2000 961 East Main Street Harrisburg, PA 17106 Spartanburg, SC 29302 Capital Asset Recovery Internal Revenue Service (ED)** FFCC Columbus Inc. PO Box 192585 Post Office Box 7346 1550 Old Henderson Road STE 51 Philadelphia, PA 19101-7346 Dallas, TX 75219 Columbus, OH 43220-3626 US Attorney's Office (ED)** Capital One First Premier Bank 150 Fayetteville Street Post Office Box 30285 Post Office Box 5524 Suite 2100 Salt Lake City, UT 84130-0285 Sioux Falls, SD 57117-5524 Raleigh, NC 27601-1461 North Carolina Dept. of Revenue** Focus Financial Services Capital One 3800 S. Congress Avenue Post Office Box 85015 Post Office Box 1168 Raleigh, NC 27602-1168 Richmond, VA 23285-5075 Boynton Beach, FL 33426 U.S. Attorney General Charlotte Metro Credit Geico U.S. Department of Justice 718 Central Ave Regional Office

Charlotte, NC 28204

One GEICO Center

Macon, GA 31296-0001

950 Pennsylvania Ave. NW

Washington, DC 20530-0001

GEICO KLS Financial National Credit Systems 117 East 24th Street Post Office Box 23356 991 Aviation Pkwy #300 Pittsburgh, PA 15222-3356 Morrisville, NC 27560 New York, NY 10010 George Brown Associates, Inc. KLS Financial Services National Credit Systems 2200 Crown Point Executive Drive 3750 Naturally Fresh Blvd PO BOX 565 Charlotte, NC 28227 Morrisville, NC 27560 Atlanta, GA 30349 Gulf Coast Collection Kross, Lieberman and Stone, Inc NC Department of Justice 56300 Marquesas Circle P.O. Box 565 for NC Department of Revenue Morrisville, NC 27560-0565 Post Office Box 629 Sarasota, FL 34233 Raleigh, NC 27602-0629 Law Office of John T Orcutt Night & Day Dental Hawthorne at the Greene 3500 N. Duke Street 13625 Haven Ridge Lane 6616 Six Forks Road Charlotte, NC 28215 Suite 203 Durham, NC 27704 Raleigh, NC 27615 Hunter Warfield, Inc. Leonard Aluminum Utility Buildings Online Information Services 4620 Woodland Corporate Boulevard 630 West Inependence Blvd. 685 W. Fire Tower Rd. Tampa, FL 33614-2415 Winterville, NC 28590 Suite 3 Mount Airy, NC 27030 IC Systems Liberty University Optimum Outcomes Inc 1971 University Boulevard Post Office Box 58015 Post Office Box 64378 Lynchburg, VA 24502 Saint Paul, MN 55164-0378 Raleigh, NC 27658 Integra Springs at Kellswater LVNV Funding Professional Debt 4800 Integra Springs Boulevard 55 Beattie Place 4161 Carmichael Avenue, Ste 201 Kannapolis, NC 28081 Suite 110 Jacksonville, FL 32207 Greenville, SC 29601 Interstate Credit Collections Motomax Financial RMB of North Carolina, Inc. 711 Coliseum Plaza Court Attn: Officer 409 Bearden Park Circle Winston Salem, NC 27106 216 13th Street Knoxville, TN 37919 Columbus, GA 31901 Jon Barry & Associates Nathan Schlosser Spectrum

16 E 1st Street

Wendell, NC 27591

PO BOX 4617

Carol Stream, IL 60197-4617

PO Box 127

Concord, NC 28026

Spectrum
Post Office Box 2553
Columbus, OH 43216-2553

Weddington Family Med 8930 Blakeney Professional Drive Charlotte, NC 28277

State Employees' Credit Union Attn: Officer Post Office Box 25279 Raleigh, NC 27611

TekCollect Post Office Box 1269 Columbus, OH 43216

TekCollect 871 Park Street Columbus, OH 43215

Time Warner Cable aka Spectrum 101 Innovation Avenue Suite 100 Morrisville, NC 27560-8586

UNC Health Care Customer Service PO Box 168 Chapel Hill, NC 27514

UNC Health Care Information Serv. 1025 Think PL Morrisville, NC 27560-9002

UNC Healthcare 2025 Think Place Morrisville, NC 27560-9002

Weddington Family Dentistry 3099 Rock Hill Church Road Concord, NC 28027

United States Bankruptcy Court Eastern District of North Carolina (NC Exemptions)

Last	ern District of North Caronna (NC)	2xcmptions)	
Natasha Ann Richardson	Case No		
	Debtor(s)	Chapter 13	3
VERI	FICATION OF CREDITOR	R MATRIX	
above-named Debtor hereby verifies t	hat the attached list of creditors is true and	correct to the best of h	is/her knowledge.
e: November 8, 2021	/s/ Natasha Ann Richardson		
November 8, 2021	Natasha Ann Richardson		

Signature of Debtor